

SECTION 404 (2) (f)  
PERFORMANCE INDICATORS  
FY 2005

# **Michigan Mental Health Performance Indicator System**

FY 2005  
Longitudinal Report

May 2006

# MICHIGAN MENTAL HEALTH PERFORMANCE INDICATOR SYSTEM

FY 2005

The Michigan Mission-Based Performance Indicator System was initiated in 1997 with full implementation occurring on October 1, 1998 with the signing of the Managed Specialty Supports and Services Contract between the Michigan Department of Community Health (MDCH) and the state's 48 community mental health services programs (CMHSPs). The CMHSPs are responsible for providing services, directly or via contract, to persons with mental illness and persons with developmental disabilities. The Performance Indicator System is one element of several in the Quality Management System that MDCH put into effect under the new contract.

The Performance Indicator System was developed by MDCH staff after a thorough review of indicators used by various national organizations and the input of Michigan's consumers, advocates, and CMHSP staff. Currently, Version 4.0 consists of numerous indicators divided into three essential domains of quality identified in the MDCH mission statement: **access**, **efficiency**, and **outcome**. Aggregated performance indicator data is submitted quarterly by CMHSPs, analyzed by MDCH staff, and presented in reports using both statistical and graphical methods. The reports are distributed to CMHSPs, MDCH staff and other interested stakeholders, including the Michigan Legislature.

This report was developed to illustrate performance over time as well as for fiscal year 2005 on access, efficiency and outcome indicators which MDCH believe could be affected by the implementation of managed care. Several of the indicators display pre-managed care data because the indicator was implemented prior to the FY 1998-2000 contract. Those indicators for which graphs begin with "period end date = 12/98" were first implemented with the managed care contract starting October 1, 1998.

## Access

The concept of "access to care" reflects the ease with which care can be initiated and maintained. The Mission-based Performance Indicator System uses a variety of measures to evaluate access to Michigan's public behavioral healthcare system, including the percent of Medicaid recipients having received CMHSP managed services, several indicators of timeliness in the areas of screening and assessment, follow-up care for inpatient discharges.

## Efficiency

Efficiency is defined as the level of outcome achieved for a given level of resource expenditure. This report shows the percentage of total expenditures spent on CMHSP administrative functions (all funding streams). Combined with other indicators of performance, information on percentage spent on administrative costs can be used as an indication of an agency's efficiency.

## Outcomes

Outcomes are defined as changes in a consumer's current or future health status, level or functioning, quality of life, or satisfaction that can be attributed to the care provided. The current report focuses on the percentage of children with serious mental illness as well as all other persons who are readmitted to a psychiatric facility within 30 days of discharge.

Throughout the implementation of the Performance Indicator System, MDCH Mental Health Quality Management staff has worked with CMHSP staff to clarify data definitions and to insure consistency of data collection methods and accuracy of the data submitted. As experience and insight are gained through monitoring the performance of CMHSPs, standards for various indicators will be established and requirements for meeting these standards integrated into the contract. MDCH Mental Health Contract Management staff follow-up with CMHSPs that repeatedly submit data after the due date, are identified as negative statistical outliers, or fail to meet standards on any one indicator for two consecutive quarters. “Follow-up” may range from the discussion of poor performance or the development of performance objectives in the contract, to the imposition of punitive sanctions. Mental Health review teams conduct audits of the validity and integrity of data collection and processing methods during their annual site visits to CMHSPs. CMHSPs found to be out of compliance with MDCH standards must submit plans of correction, the implementation of which will be monitored by the MDCH contract managers.

### **Guide for Interpretation of Graphics**

This section is a guide to interpreting the dot chart, and scatterplots displayed in this report. Understanding the kind of information conveyed by these graphs is necessary for understanding how individual community mental health services programs have performed, both absolutely and relatively, on the array of performance indicators currently collected and reported by the Department of Community Health.

### **The Dot Chart**

The dot chart was invented in 1981 by William S. Cleveland of Bell Laboratories in order to display quantitative data in which each value has a label associated with it that must be shown on the graph. The large dots display the numerical values and the dotted lines permit the connection of each value with its label. On the left side of the dot chart are the labels, that is, the names of the community mental health services programs. Directly to the right of each program is a dot representing the program’s performance on the indicator. Some CMHSPs may appear to lack a corresponding dot. This is an artifact of the graphing program which attempts to reduce visual clutter by using a single dot to represent all units tied at a particular numerical value

### **Scatterplot with LOWESS Smooth**

For each indicator, the scatterplot displays the performance of each CMHSP at each time with a solid black dot. A trend line is fit to the data using a locally weighted smoother. This graphic permits an assessment of statewide trends, whether linear or nonlinear, over time.

### **The Multiplot**

A graphic developed by William S. Cleveland, Ph.D. of Lucent Technologies, the multiplot permits comparisons between CMHSPs overtime on selected performance measures.

### Longitudinal Charts

1. The percentage of Medicaid-eligible children with SED and the percentage of all other persons receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within three hours. **Standard: 95%**
2. The percentage of persons receiving a face-to-face meeting with a professional within 14 calendar days of a non-emergency request for service (by 4 sub-populations: MI-adults, MI-children, DD-adults, DD-children). **Standard: 95%**
3. Percentage of persons starting any needed on-going service within 14 days of a non-emergent assessment with a professional (by 4 sub-populations: MI-adults, MI-children, DD-adults, DD-children). **Standard: 95% within 14 days**
5. The percentage of children with SED and the percentage of all other persons readmitted to an inpatient psychiatric unit within 30 days of discharge. **Standard: 15% or less**
8. The percentage of children with SED and the percentage of all other persons discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.
22. Percentage of area Medicaid recipients having received CMHSP managed services.
27. Percentage of face-to-face assessments with professionals.
33. The percentage of total expenditures spent on CMHSP administrative functions (all funding streams).

Indicator 1a. *Access: Timeliness - Inpatient Screening -- Percentage of children with SED receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within three hours. The standard is 95 percent within three hours.*

**Rationale for Use:**

Persons who are experiencing symptoms serious enough to warrant evaluation for inpatient care are potentially at risk of danger to themselves or others. Thus, time is of the essence. This indicator assesses whether CMHSPs are meeting the department's standard that 95 percent of the inpatient screenings have a final disposition within three hours. This indicator is a standard measure of access to care.

**Definitions:**

*Disposition* means the decision was made to refer, or not refer, to inpatient psychiatric care.

**Method of Calculation:**

- **Numerator:** The number of children with serious emotional disturbance (SED) receiving a pre-admission screening for inpatient care for whom a decision regarding admission was made within three hours.
- **Denominator:** The total number of children with serious emotional disturbance (SED) receiving a pre-admission screening for inpatient care during the time period.

Note: Starting with the reporting period covering October 1, 2002 to December 31, 2002, this indicator has been separated out into two indicators. Indicator number 1a covers SED children and Indicator 1b covers all other persons.

**Descriptive Statistics:**

	DEC_04	MAR_05	JUN_05	SEPT_05
N of cases	46	46	44	42
Minimum	50.000	80.000	50.000	93.150
Maximum	100.000	100.000	100.000	100.000
Median	100.000	100.000	100.000	100.000
Mean	97.613	98.070	97.574	99.108

**Minimum:** The lowest score in the distribution of scores

**Maximum:** The highest score in the distribution of scores

**Median:** A measure of the center of the distribution of indicator scores, the median is the score that divides the distribution in half. Exactly 50% of the scores will fall below the median value; 50% will fall above that value.

**Mean:** A measure of the center of the distribution of indicator scores; the **average** score in the distribution.

**Annual Percentage Calculation:**

The annual percentage for this indicator is derived from the weighted quarterly percentage, which is the quarterly percentage times the quarterly total number of consumers for this indicator.

**Numerator:** Sum of the weighted quarterly percentages.

**Denominator:** Sum of the total number of consumers for this indicator across quarters.

*Indicator 1a continued:*

## **Comments**

**Historical trends:** This indicator has been in place since FY '03. The trend line (lowess smooth line) of the longitudinal scatter plot <sup>1</sup>shows a flat trend at 100 percent, clearly above the 95 standard for this indicator. The scatterplot also shows that there is very little variation or spread among the CMHSPs.

**2005 CMHSP Performance:** As shown in the dot plot for FY '05, 5 of the 46 CMHSPs did not meet the 95 percent standard. The CMHSPs failing to meet the standard are. Kent (94.24%), Huron (92.86%\*), Detroit/Wayne (90.73), Sanilac (90.00%\*), and Genesee (89.29%).

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<sup>1</sup> Percentage based on fewer than 20 consumers.

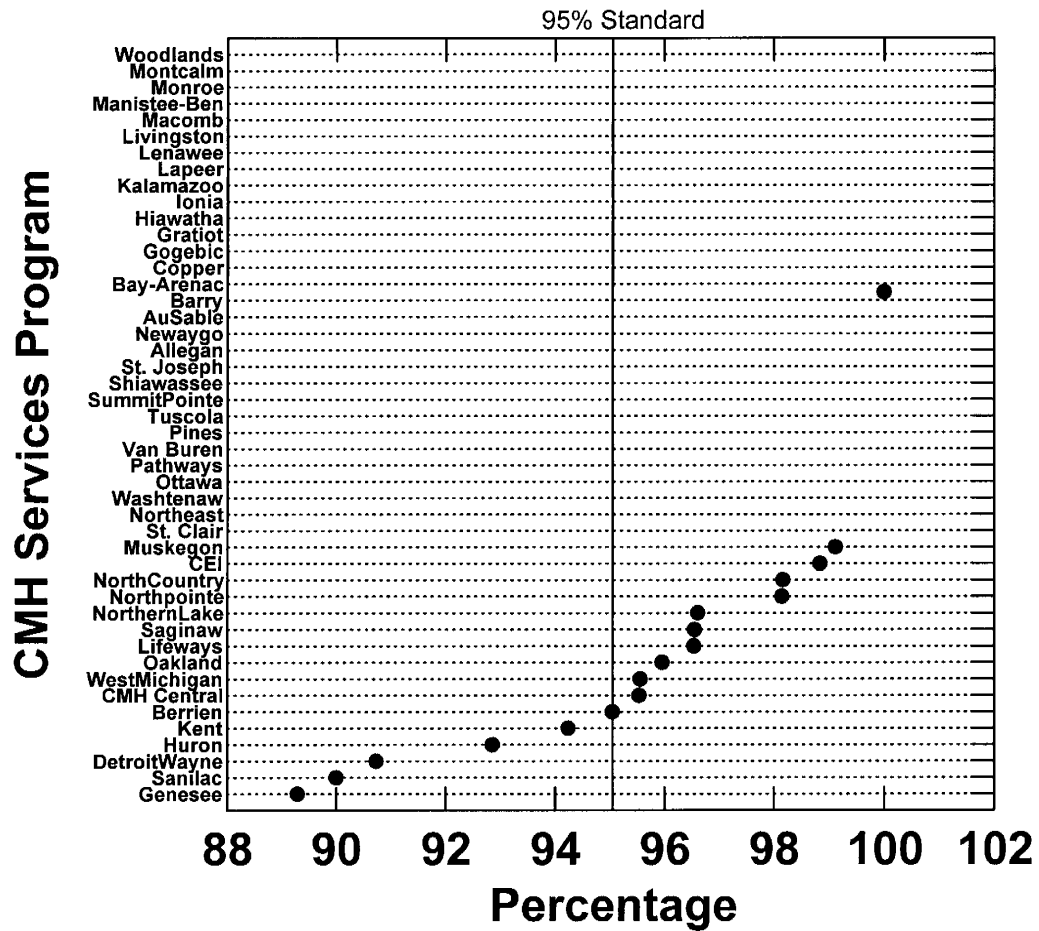
Indicator 1a: Percentage of Children with SED Receiving a Pre-Admission Screening for Psychiatric Inpatient Care for Whom the Disposition was Completed within Three Hours

	October - December 2004			January - March 2005			April - June 2005			July - September 2005			Fiscal Year Percentage
	Percentage Q1	Number of Referrals for SED Children Q1	Number Completed in Three Hours for SED Children Q1	Percentage Q2	Number of Referrals for SED Children Q2	Number Completed in Three Hours for SED Children Q2	Percentage Q3	Number of Referrals for SED Children Q3	Number Completed in Three Hours for SED Children Q3	Percentage Q4	Number of Referrals for SED Children Q4	Number Completed in Three Hours for SED Children Q4	
Allegan	100.00%	11	11	100.00%	11	11	100.00%	7	7	100.00%	5	5	100.00
AuSable	100.00%	4	4	100.00%	4	4	100.00%	7	7	100.00%	2	2	100.00
Barry	100.00%	8	8	100.00%	5	5	100.00%	6	6	100.00%	6	6	100.00
Bay-Arenac	100.00%	38	38	100.00%	41	41	100.00%	27	27	100.00%	32	32	100.00
Berrien	96.55%	29	28	85.71%	28	24	100.00%	19	19	100.00%	25	25	95.05
CEI	100.00%	21	21	96.00%	25	24	100.00%	25	25	100.00%	15	15	98.64
CMH Central MI	95.74%	47	45	95.00%	40	38	92.31%	39	36	100.00%	31	31	95.54
Copper	100.00%	16	16	100.00%	16	16	100.00%	23	23	100.00%	12	12	100.00
Detroit-Wayne	94.19%	310	292	82.90%	345	286	90.97%	288	262	97.13%	244	237	90.73
Genesee	92.86%	42	39	88.24%	68	60	83.05%	59	49	94.55%	55	52	89.29
Gogebic	100.00%	7	7	100.00%	10	10	100.00%	16	16	100.00%	1	1	100.00
Gratiot	100.00%	1	1	100.00%	3	3	-	0	0	100.00%	1	1	100.00
Hiawatha	100.00%	31	31	100.00%	17	17	100.00%	17	17	100.00%	23	23	100.00
Huron	100.00%	7	7	100.00%	4	4	50.00%	2	1	100.00%	1	1	92.86
Ionia	100.00%	14	14	100.00%	20	20	100.00%	9	9	100.00%	17	17	100.00
Kalamazoo	100.00%	39	39	100.00%	38	38	100.00%	35	35	100.00%	40	40	100.00
Kent	90.63%	32	29	94.12%	51	48	97.37%	38	37	94.44%	18	17	94.24
Lapeer	100.00%	6	6	100.00%	9	9	100.00%	5	5	100.00%	2	2	100.00
Lenawee	100.00%	2	2	100.00%	2	2	100.00%	3	3	100.00%	2	2	100.00
Lifeways	97.96%	49	48	98.39%	62	61	95.35%	86	82	95.24%	63	60	96.54
Livingston	100.00%	7	7	100.00%	6	6	100.00%	2	2	-	0	0	100.00
Macomb	100.00%	90	90	100.00%	104	104	100.00%	87	87	100.00%	58	58	100.00
Manistee-Benzie	100.00%	8	8	100.00%	10	10	100.00%	2	2	100.00%	2	2	100.00
Monroe	100.00%	3	3	100.00%	18	18	100.00%	9	9	-	0	0	100.00
Montcalm	100.00%	7	7	100.00%	16	16	100.00%	20	20	100.00%	12	12	100.00
Muskegon	100.00%	37	37	100.00%	22	22	100.00%	34	34	95.00%	20	19	99.12
Newaygo	100.00%	7	7	100.00%	9	9	100.00%	3	3	100.00%	11	11	100.00
Northern Lakes	100.00%	11	11	80.00%	10	8	100.00%	14	14	100.00%	24	24	96.61
Northeast	100.00%	19	19	100.00%	8	8	100.00%	9	9	100.00%	12	12	100.00
North Country	100.00%	51	51	95.83%	24	23	95.45%	22	21	100.00%	12	12	98.17
Northpointe	100.00%	31	31	100.00%	26	26	96.67%	30	29	95.24%	21	20	98.15
Oakland	93.38%	138	127	96.21%	132	127	97.08%	137	133	97.78%	90	88	95.96
Ottawa	100.00%	22	22	100.00%	22	22	100.00%	20	20	100.00%	33	33	100.00
Pathways	100.00%	42	42	100.00%	29	29	100.00%	27	27	100.00%	25	25	100.00
Pines	100.00%	1	1	100.00%	20	20	100.00%	13	13	100.00%	8	8	100.00
Saginaw	98.91%	92	91	98.80%	83	82	95.00%	100	95	93.15%	73	68	96.55
Sanilac	50.00%	2	1	100.00%	6	6	-	0	0	100.00%	2	2	90.00
Shiawassee	100.00%	20	20	100.00%	23	23	100.00%	14	14	100.00%	10	10	100.00
St. Clair	100.00%	18	18	100.00%	17	17	100.00%	13	13	100.00%	8	8	100.00
St. Joseph	100.00%	4	4	100.00%	16	16	100.00%	9	9	100.00%	18	18	100.00
Summit Pointe	100.00%	3	3	100.00%	14	14	100.00%	12	12	100.00%	9	9	100.00
Tuscola	100.00%	2	2	100.00%	2	2	100.00%	5	5	-	0	0	100.00
Van Buren	100.00%	5	5	100.00%	5	5	100.00%	4	4	100.00%	3	3	100.00
Washtenaw	100.00%	5	5	100.00%	13	13	100.00%	15	15	-	0	0	100.00
West Michigan	80.00%	10	8	100.00%	14	14	100.00%	8	8	100.00%	13	13	95.56
Woodlands	100.00%	6	6	100.00%	10	10	100.00%	9	9	100.00%	10	10	100.00
	99.97%	1,353	1,312	94.03%	1,458	1,371	95.79%	1,329	1,273	97.85%	1,069	1,046	

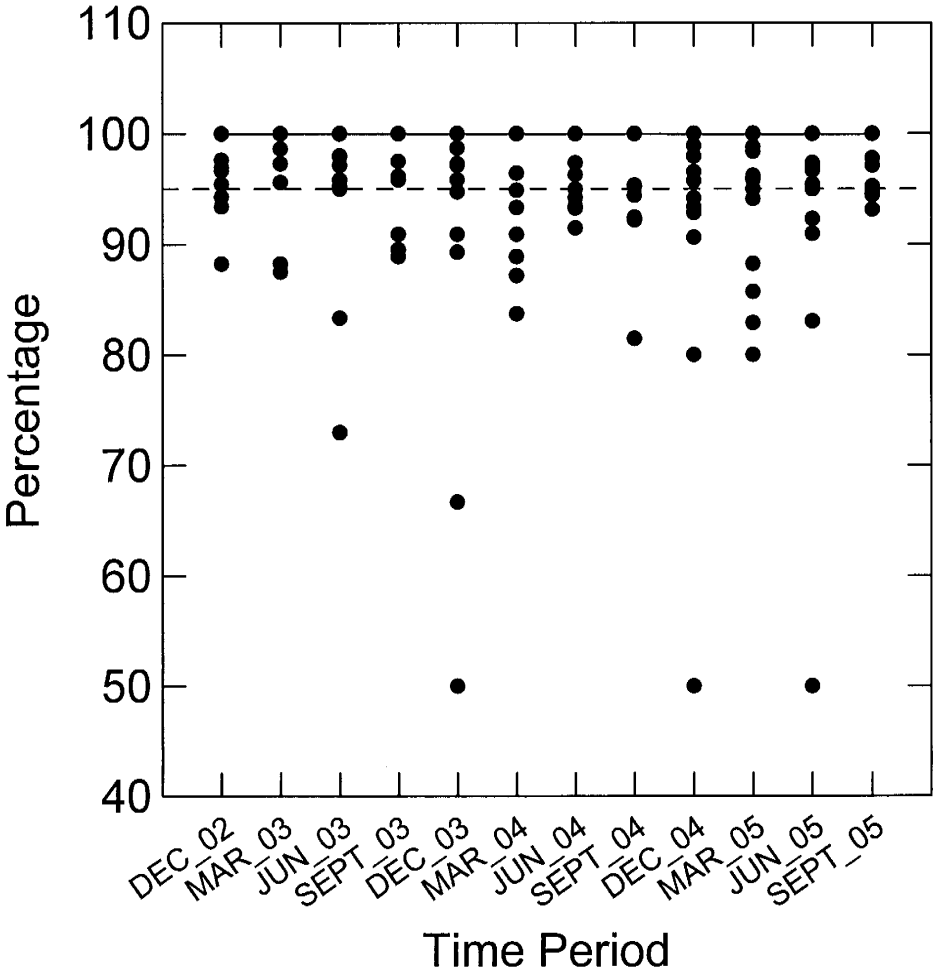
\* Percentage based on fewer than 20 consumers.



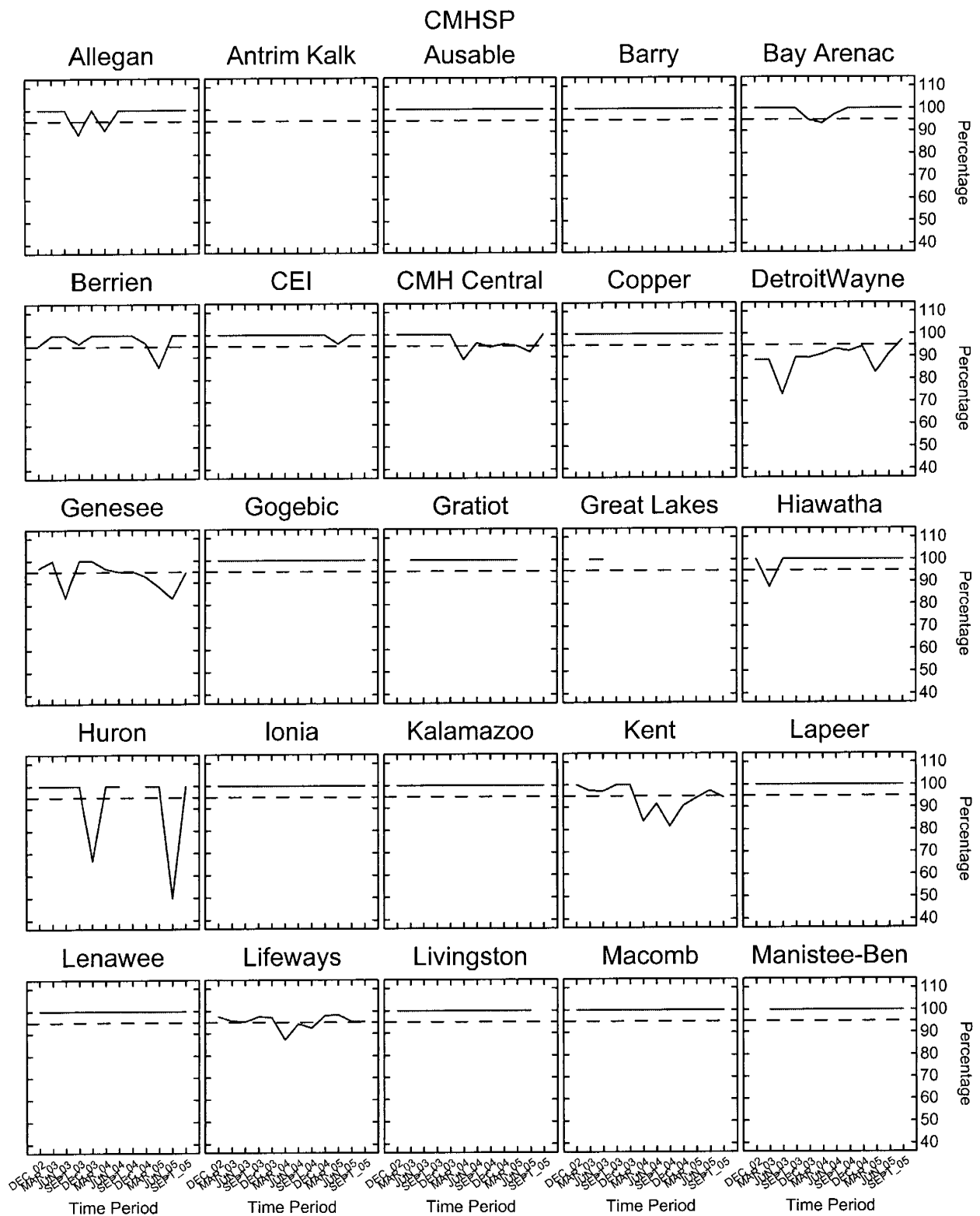
# Percentage of SED Children Receiving a Pre-Admission Screening for Psychiatric Inpatient Care for Whom the Disposition was Completed Within Three Hours



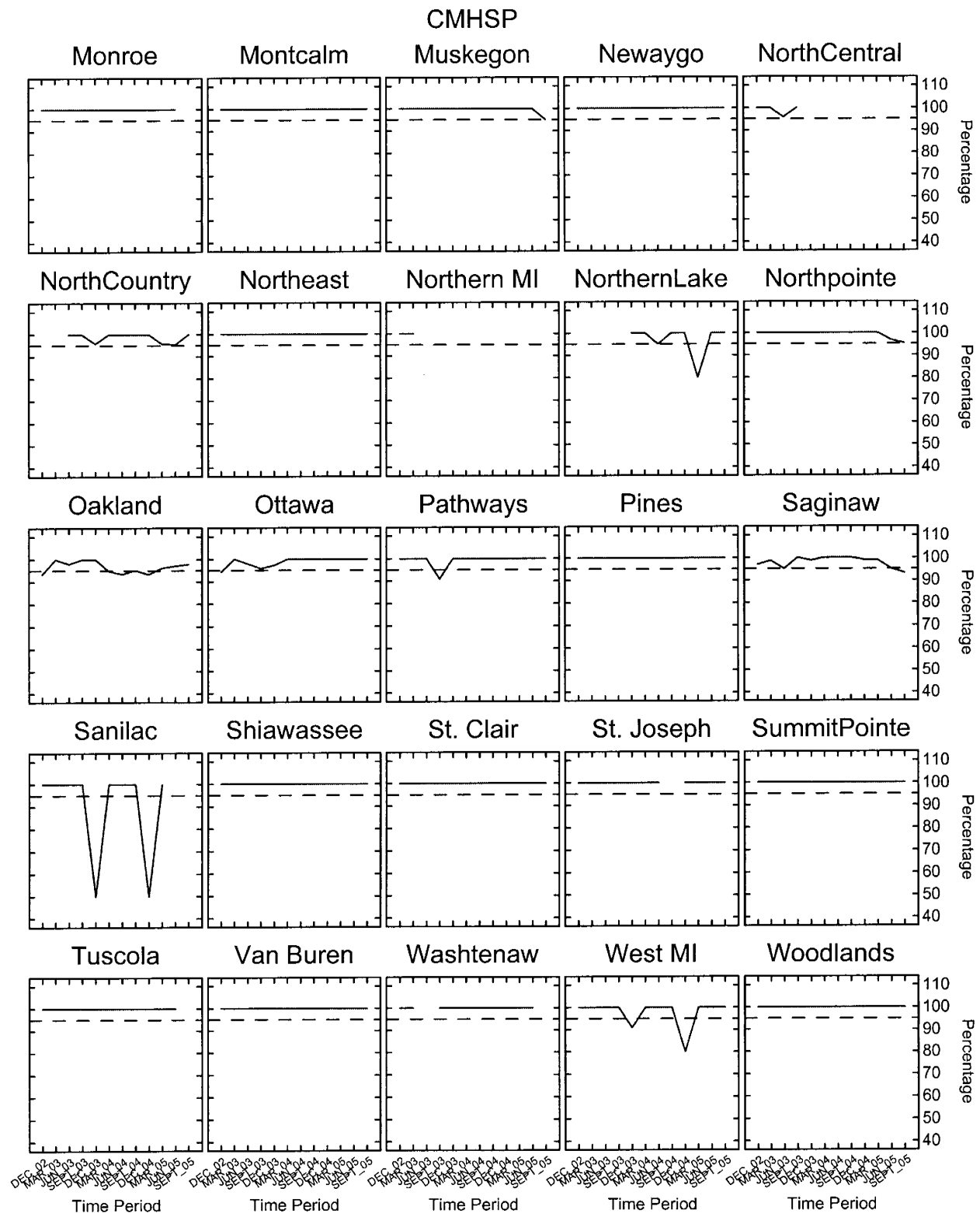
Scatterplot 1a: Timeliness of Inpatient Screening  
(SED Children)



# Indicator No. 1a - Timeliness of Inpatient Screening (SED Children)



# Indicator No. 1a - Page Two



*Indicator 1b. Access: Timeliness - Inpatient Screening -- Percentage of all other persons receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within three hours. The standard is 95 percent within three hours.*

**Rationale for Use:**

Persons who are experiencing symptoms serious enough to warrant evaluation for inpatient care are potentially at risk of danger to themselves or others. Thus, time is of the essence. This indicator assesses whether CMHSPs are meeting the department's standard that 95 percent of the inpatient screenings have a final disposition within three hours. This indicator is a standard measure of access to care.

**Definitions:**

*Disposition* means the decision was made to refer, or not refer, to inpatient psychiatric care.

**Method of Calculation:**

- **Numerator:** The number of persons receiving a pre-admission screening for inpatient care for whom a decision regarding admission was made within three hours.
- **Denominator:** The total number of persons receiving a pre-admission screening for inpatient care during the time period.

Note: Starting with the reporting period covering October 1, 2002 to December 31, 2002, this indicator has been separated out into two separate indicators. Indicator number 1a covers SED children and Indicator 1b covers all other persons.

**Descriptive Statistics:**

	DEC 04	MAR 05	JUN 05	SEPT 05
N of cases	46	46	46	46
Minimum	87.370	87.970	78.750	74.220
Maximum	100.000	100.000	100.000	100.000
Median	100.000	100.000	100.000	100.000
Mean	98.491	98.553	97.984	98.099

**Comments:**

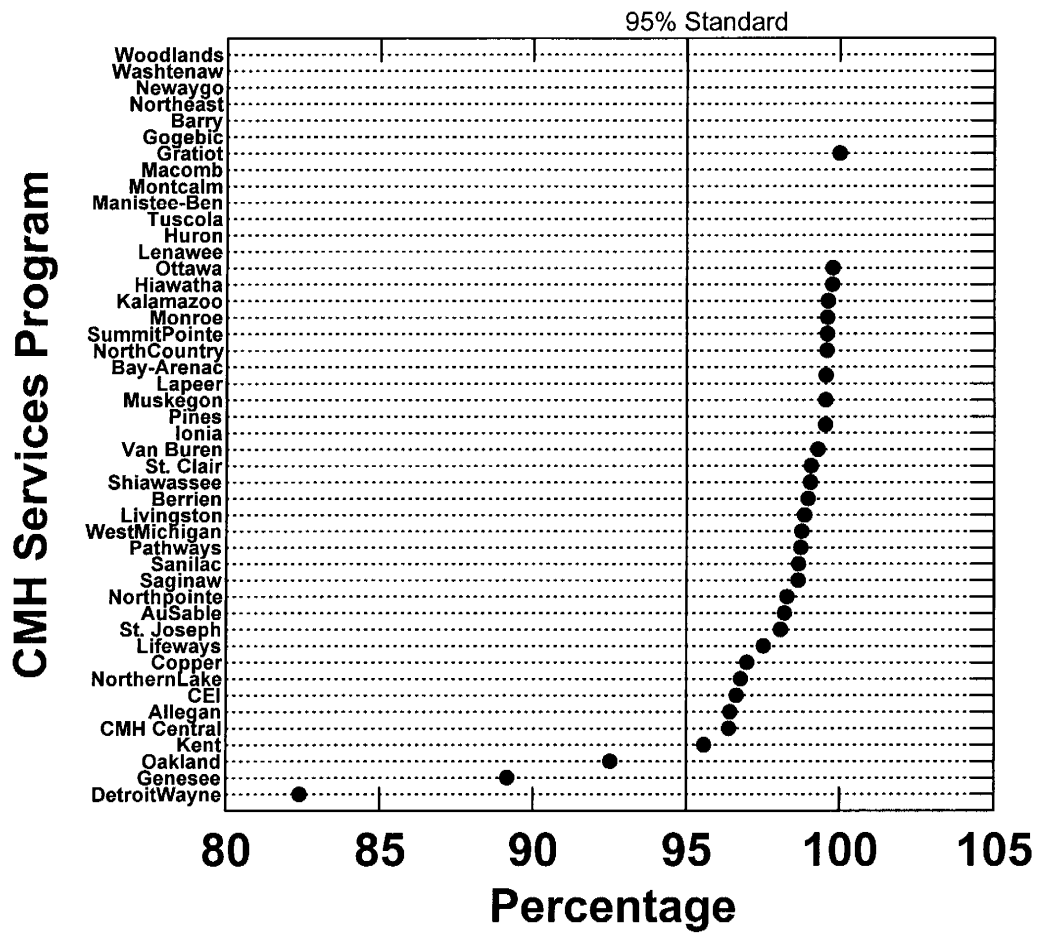
Historical trends: This indicator has been in place since FY '03. The trend line (lowest smooth line) of the longitudinal scatter plot shows a flat trend at 100 percent, clearly above the 95 standard for this indicator. The scatterplot also shows that there is very little variation or spread among the CMHSPs.

2005 CMHSP Performance: As shown in the ordered dot plot for FY '05, 3 of the 46 CMHSPs did not meet the 95 percent standard. The CMHSPs failing to meet the standard are: Oakland (92.53%), Genesee (89.16%); and Detroit/Wayne, (82.41%). It should be noted that Genesee and Detroit/Wayne did not meet the standard for any of the four quarters.

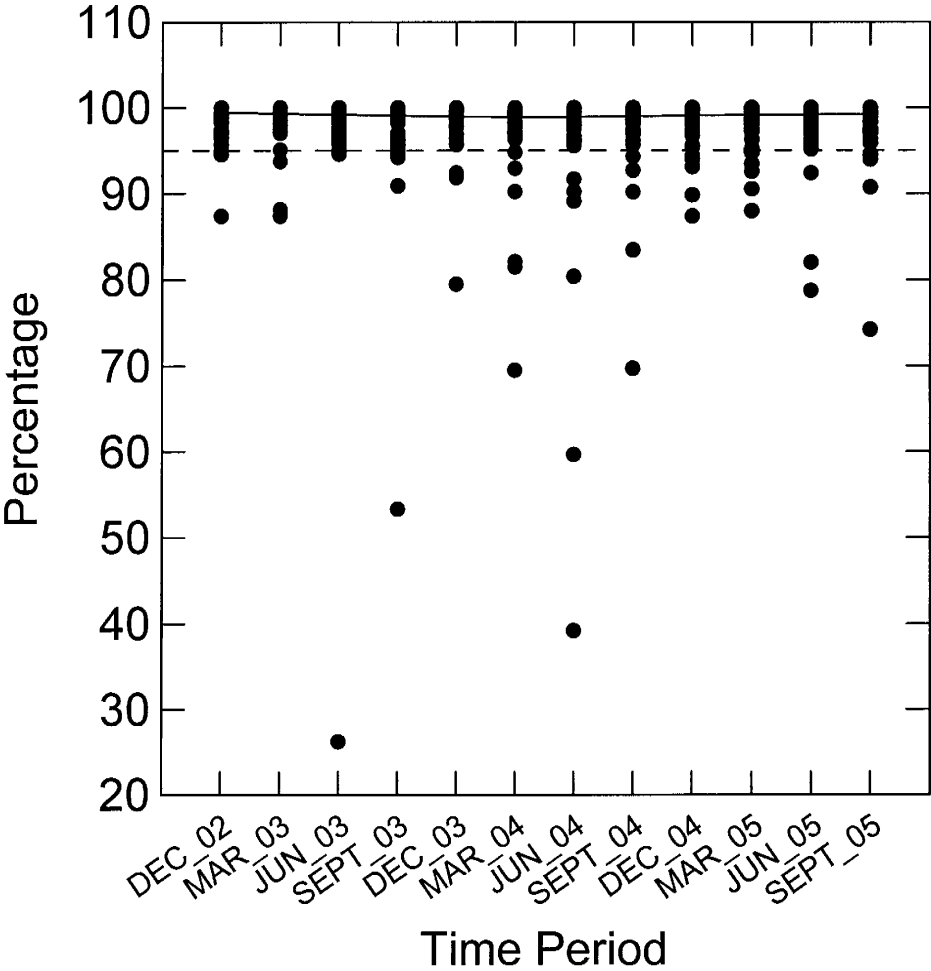
Indicator 1b: Percentage of All Other Persons Receiving a Pre-Admission Screening for Psychiatric Inpatient Care for Whom the Disposition was Completed within Three Hours

	October - December 2004			January - March 2005			April - June 2005			July - September 2005			Fiscal Year Percentage
	Percentage Q1	Number of Referrals for All Other Persons Q1	Number Completed in Three Hours for All Other Persons Q1	Percentage Q2	Number of Referrals for All Other Persons Q2	Number Completed in Three Hours for All Other Persons Q2	Percentage Q3	Number of Referrals for All Other Persons Q3	Number Completed in Three Hours for All Other Persons Q3	Percentage Q4	Number of Referrals for All Other Persons Q4	Number Completed in Three Hours for All Other Persons Q4	
Allegan	94.00%	50	47	100.00%	59	59	95.65%	23	22	94.59%	37	35	96.45
AuSable	98.28%	116	114	98.52%	135	133	99.15%	117	116	97.16%	141	137	98.23
Barry	100.00%	29	29	100.00%	40	40	100.00%	25	25	100.00%	35	35	100.00
Bay-Arenac	100.00%	115	115	100.00%	118	118	97.92%	96	94	100.00%	121	121	99.56
Berrien	98.04%	204	200	99.46%	186	185	98.59%	213	210	100.00%	179	179	98.98
CEI	98.71%	232	229	96.31%	406	391	95.14%	494	470	97.52%	483	471	96.66
CMH Central MI	96.74%	184	178	95.21%	188	179	99.43%	174	173	94.41%	179	169	96.41
Copper	95.60%	91	87	100.00%	104	104	96.30%	108	104	95.88%	97	93	97.00
Detroit-Wayne	87.37%	1,354	1,183	92.56%	712	659	78.75%	1,087	856	74.22%	1,214	901	82.41
Genesee	93.11%	784	730	87.97%	482	424	82.03%	473	388	90.75%	530	481	89.16
Gogebic	100.00%	29	29	100.00%	33	33	100.00%	39	39	100.00%	17	17	100.00
Gratiot	100.00%	9	9	100.00%	11	11	100.00%	10	10	100.00%	17	17	100.00
Hiawatha	100.00%	123	123	100.00%	95	95	100.00%	74	74	99.25%	134	133	99.77
Huron	100.00%	12	12	100.00%	26	26	100.00%	16	16	100.00%	9	9	100.00
Ionia	98.15%	54	53	100.00%	51	51	100.00%	64	64	100.00%	49	49	99.54
Kalamazoo	100.00%	222	222	100.00%	228	228	100.00%	169	169	98.42%	190	187	99.63
Kent	94.39%	303	286	93.46%	321	300	97.39%	307	299	97.28%	294	286	95.59
Lapeer	100.00%	73	73	100.00%	60	60	100.00%	54	54	97.62%	42	41	99.56
Lenawee	100.00%	34	34	100.00%	47	47	100.00%	48	48	100.00%	45	45	100.00
Lifeways	97.26%	292	284	98.42%	444	437	96.94%	458	444	97.46%	394	384	97.54
Livingston	100.00%	52	52	94.74%	38	36	100.00%	57	57	100.00%	30	30	98.87
Macomb	100.00%	590	590	100.00%	371	371	100.00%	409	409	100.00%	349	349	100.00
Manistee-Benzie	100.00%	25	25	100.00%	26	26	100.00%	33	33	100.00%	35	35	100.00
Monroe	98.61%	72	71	100.00%	84	84	100.00%	54	54	100.00%	44	44	99.61
Montcalm	100.00%	58	58	100.00%	69	69	100.00%	75	75	100.00%	65	65	100.00
Muskegon	100.00%	98	98	100.00%	83	83	100.00%	147	147	98.25%	114	112	99.55
Newaygo	100.00%	53	53	100.00%	42	42	100.00%	32	32	100.00%	68	68	100.00
Northern Lakes	99.48%	191	190	98.05%	154	151	96.34%	191	184	93.95%	215	202	96.80
Northeast	100.00%	65	65	100.00%	97	97	100.00%	96	96	100.00%	114	114	100.00
North Country	100.00%	301	301	99.48%	381	379	99.74%	378	377	99.23%	392	389	99.59
Northpointe	100.00%	130	130	97.52%	121	118	95.74%	94	90	99.22%	128	127	98.31
Oakland	89.84%	699	628	90.54%	719	651	92.38%	722	667	96.39%	886	854	92.53
Ottawa	99.22%	128	127	100.00%	132	132	100.00%	79	79	100.00%	124	124	99.78
Pathways	100.00%	114	114	98.17%	218	214	97.74%	177	173	99.52%	209	208	98.75
Pines	100.00%	37	37	100.00%	64	64	98.18%	55	54	100.00%	61	61	99.54
Saginaw	99.77%	444	443	99.78%	461	460	98.54%	481	474	97.01%	569	552	98.67
Sanilac	100.00%	15	15	100.00%	11	11	100.00%	13	13	97.30%	37	36	98.68
Shiawassee	98.72%	78	77	98.80%	83	82	98.67%	75	74	100.00%	83	83	99.06
St. Clair	99.17%	121	120	98.78%	82	81	98.26%	115	113	100.00%	116	116	99.08
St. Joseph	95.45%	22	21	100.00%	80	80	96.94%	98	95	98.26%	115	113	98.10
Summit Pointe	100.00%	54	54	98.46%	65	64	100.00%	59	59	100.00%	75	75	99.60
Tuscola	100.00%	2	2	100.00%	13	13	100.00%	4	4	100.00%	13	13	100.00
Van Buren	100.00%	32	32	97.22%	36	35	100.00%	39	39	100.00%	35	35	99.30
Washtenaw	100.00%	93	93	100.00%	189	189	100.00%	195	195	100.00%	217	217	100.00
West Michigan	98.68%	76	75	100.00%	85	85	97.44%	78	76	98.86%	88	87	98.78
Woodlands	100.00%	36	36	100.00%	20	20	100.00%	25	25	100.00%	33	33	100.00
	95.54%	7,896	7,544	96.61%	7,470	7,217	94.11%	7,830	7,369	94.18%	8,422	7,932	

# Percentage of All Other Persons Receiving a Pre-Admission Screening for Psychiatric Inpatient Care for Whom the Disposition was Completed Within Three Hours



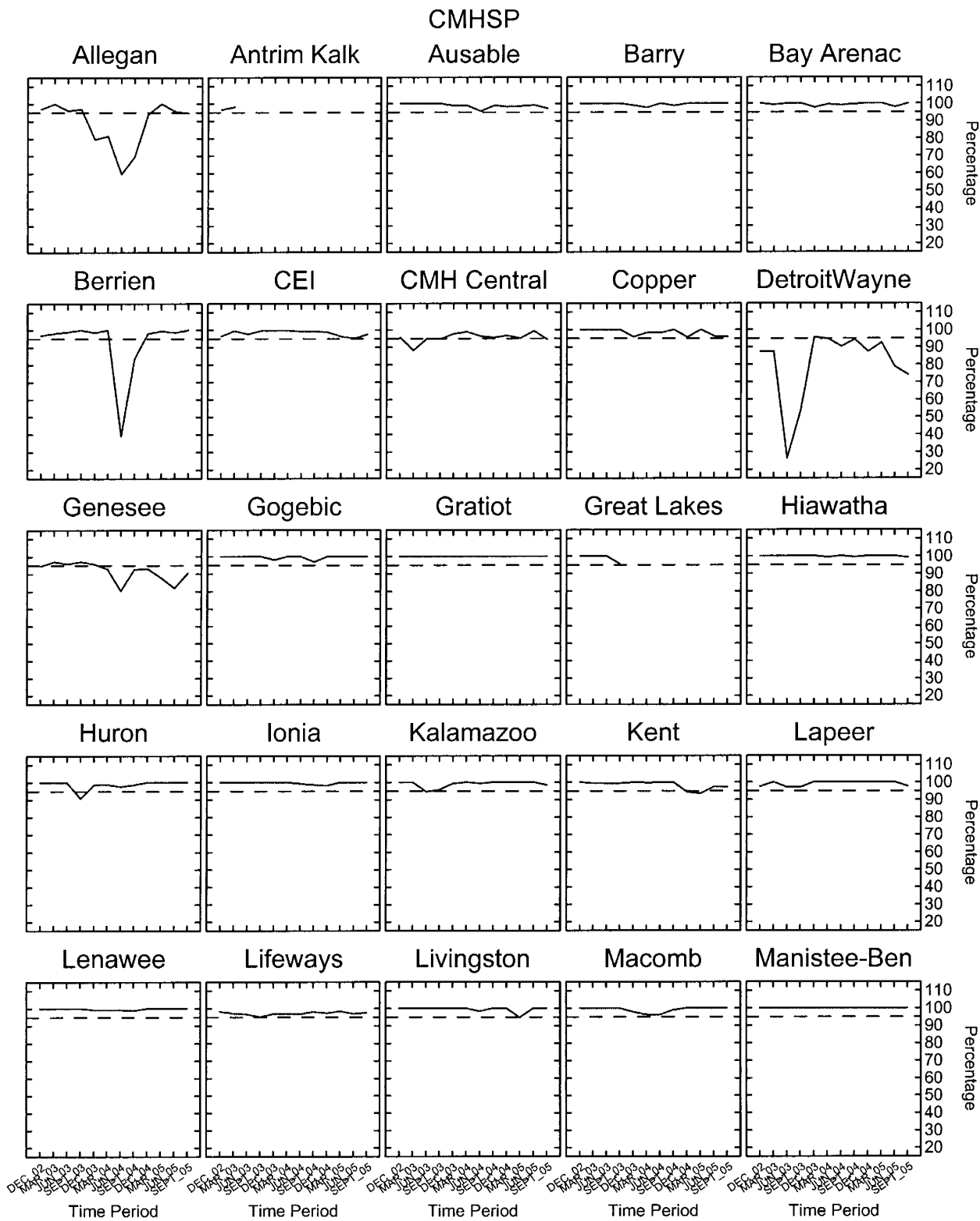
Scatterplot 1b: Timeliness of Inpatient Screening  
(All Other Persons)



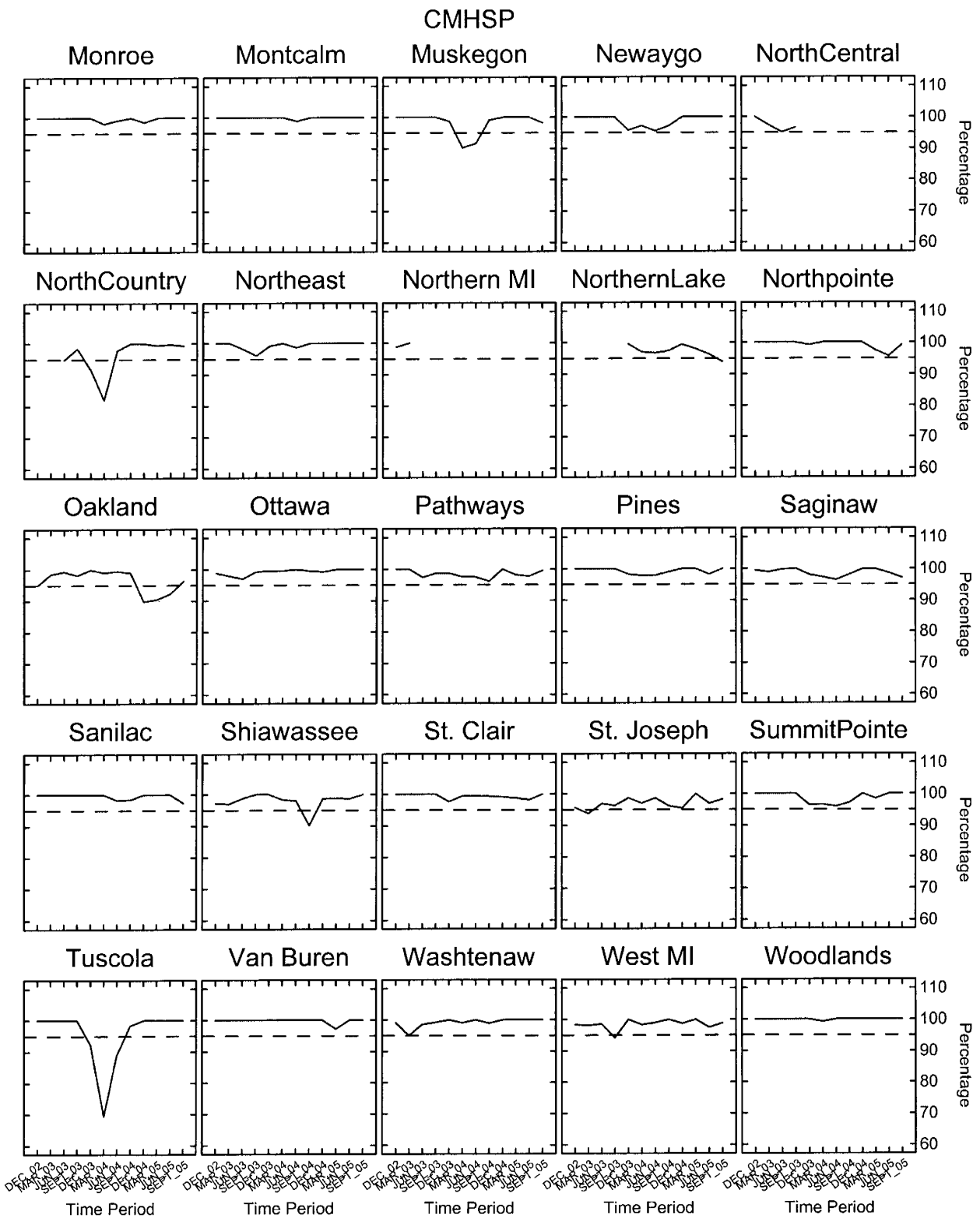


# Indicator No. 1b - Timeliness of Inpatient Screening

(All Other Persons)



# Indicator No. 1b - Page Two



*Indicator 2. Access: Timeliness -- Percentage of persons who received a face-to-face meeting with a professional within 14 calendar days of a non-emergent request for service. The standard is 95 percent within 14 days.*

**Rationale for Use:**

The length of time required to gain entry into the mental health system is an important indicator of the accessibility of services. Delays in clinical and psychosocial assessment may lead to exacerbation of symptoms and distress and poorer role functioning. The amount of time between a request for service and clinical assessment with a professional is one measure of access to care.

**Method of Calculation:**

- **Numerator:** The number of persons who received a face-to-face meeting with a professional within 14 calendar days of a non-emergent request for service.
- **Denominator:** The total number of persons who received a non-emergent face-to-face assessment with a professional during the reporting period.

A request for service occurs when a person, or someone on the person's behalf, asks that community mental health services be provided. If more than one request is made, time calculations should be based on the first. A face-to-face meeting means an assessment conducted by a mental health professional. Excluded from the definition of assessment are telephone screenings used to triage or prioritize consumers based on self-reported symptoms and problems. Also, consumers who request an appointment outside the 14 calendar day period, may be excluded from the indicator. Non-emergent assessment and services **exclude** pre-admission screening for and receipt of psychiatric in-patient care.

**Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	46	46	46	46
Minimum	76.110	90.000	85.170	70.270
Maximum	100.000	100.000	100.000	100.000
Median	98.985	98.685	99.200	99.125
Mean	97.159	97.926	97.963	97.648

**Comments:**

Historical trends: This indicator has been in place since FY '99. The trend line (lowest smooth line) of the longitudinal scatter plot shows a weak trend increasing from the 95 standard toward 100 percent. The scatterplot also shows that there was initially some slight variation or spread among the CMHSPs that has decreased over time.

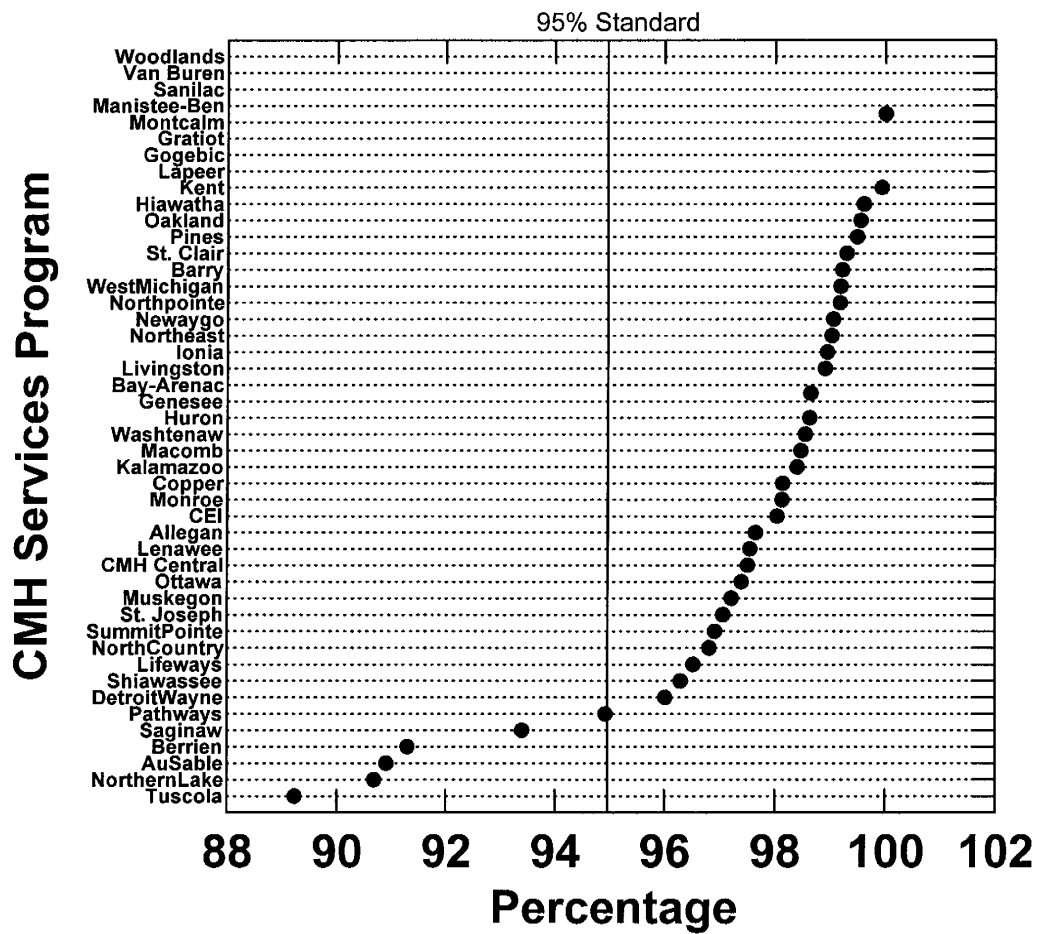
2005 CMHSP Performance: As shown in the dot plot for FY '05, 6 of the 46 CMHSPs did not meet the 95 percent standard. The CMHSPs failing to meet the standard are: Pathways (94.93%), Saginaw (93.40%), Berrien (91.29%), AuSable (90.90%), Northern Lakes (90.68%), and Tuscola (89.23%).

It should be noted that Northern Lakes did not meet the 95 percent standard during any of the four quarters of FY '05.

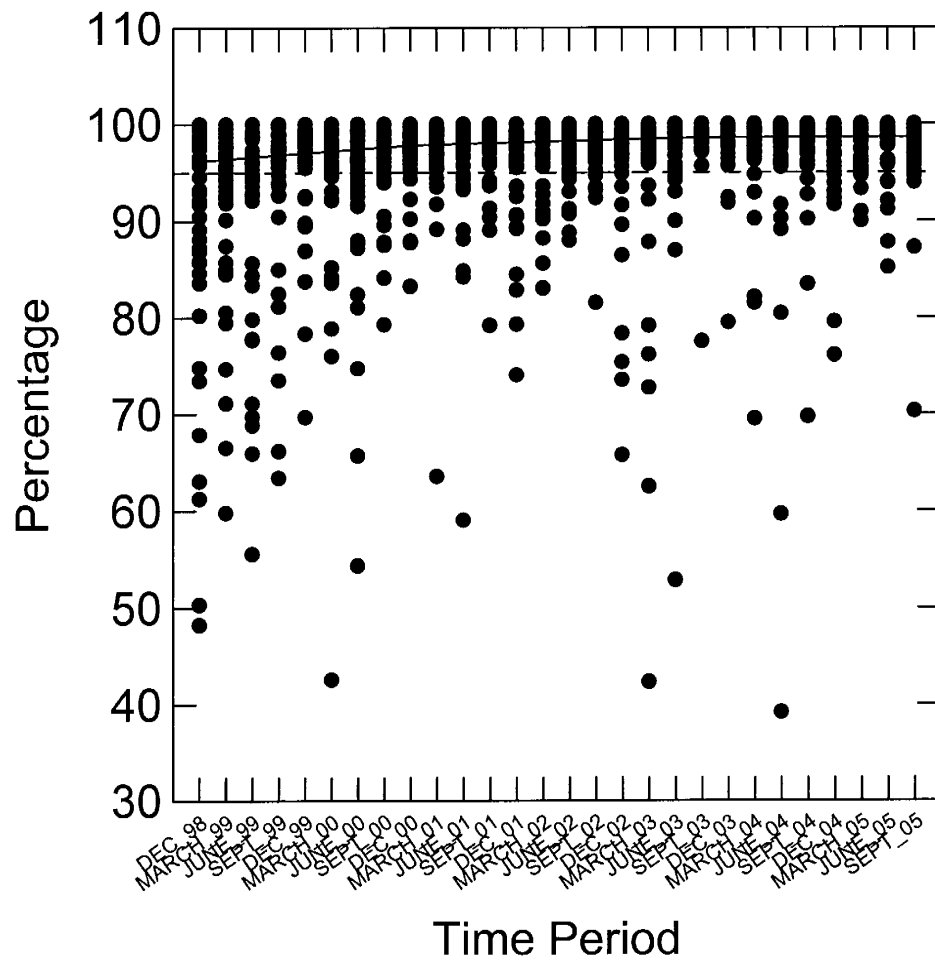
Indicator 2: Percentage of Persons Who Received a Face-to-Face Meeting with a Professional Within 14 Calendar Days of a Non-Emergent Request for Service

	October - December 2004			January - March 2005			April - June 2005			July - September 2005			Fiscal Year Percentage
	Percentage Q1	Total Persons Received Assessment Following 1st Request Q1	Total Persons Received Assessment within 14 Calendar Days Q1	Percentage Q2	Total Persons Received Assessment Following 1st Request Q2	Total Persons Received Assessment within 14 Calendar Days Q2	Percentage Q3	Total Persons Received Assessment Following 1st Request Q3	Total Persons Received Assessment within 14 Calendar Days Q3	Percentage Q4	Total Persons Received Assessment Following 1st Request Q4	Total Persons Received Assessment within 14 Calendar Days Q4	
Alegan	92.31%	143	132	100.00%	94	94	100.00%	123	123	100.00%	108	108	97.65
AuSable	76.11%	180	137	94.82%	193	183	91.19%	159	145	99.53%	215	214	90.90
Barry	98.77%	162	160	99.42%	171	170	99.36%	156	155	99.35%	155	154	99.22
Bay-Arenac	99.34%	303	301	98.48%	264	260	99.13%	229	227	97.49%	239	233	98.65
Berrien	79.56%	274	218	90.94%	287	261	99.64%	276	275	95.09%	265	252	91.29
CEI	96.80%	219	212	96.30%	487	469	99.20%	500	496	99.47%	378	376	98.04
CMH Central MI	96.86%	668	647	96.05%	708	680	97.97%	592	580	99.38%	645	641	97.51
Copper	100.00%	51	51	97.47%	79	77	98.85%	87	86	96.15%	52	50	98.14
Detroit-Wayne	96.74%	858	830	96.54%	897	866	93.93%	1,054	990	96.94%	1,241	1,203	96.02
Genesee	94.72%	492	466	98.91%	822	813	99.20%	872	865	99.81%	1,075	1,073	98.65
Gogebic	100.00%	77	77	100.00%	104	104	100.00%	69	69	100.00%	46	46	100.00
Gratiot	100.00%	72	72	100.00%	59	59	100.00%	44	44	100.00%	38	38	100.00
Hiawatha	100.00%	141	141	100.00%	128	128	98.46%	130	128	100.00%	117	117	99.61
Huron	98.51%	67	66	98.61%	72	71	97.78%	90	88	100.00%	63	63	98.63
Ionia	99.23%	130	129	100.00%	125	125	100.00%	113	113	96.30%	108	104	98.95
Kalamazoo	99.47%	189	188	98.40%	188	185	98.37%	184	181	97.35%	189	184	98.40
Kent	99.92%	1,244	1,243	99.91%	1,131	1,130	100.00%	1,079	1,079	99.90%	981	980	99.93
Lapeer	100.00%	88	88	100.00%	82	82	100.00%	85	85	100.00%	99	99	100.00
Lenawee	100.00%	104	104	95.58%	113	108	96.27%	134	129	98.55%	138	136	97.55
Lifeways	95.98%	224	215	96.04%	202	194	95.87%	121	116	98.61%	144	142	96.53
Livingston	100.00%	90	90	94.64%	56	53	100.00%	62	62	100.00%	67	67	98.91
Macomb	98.06%	464	455	99.54%	436	434	98.38%	616	606	98.12%	639	627	98.47
Manistee-Benzie	100.00%	92	92	100.00%	90	90	100.00%	78	78	100.00%	37	37	100.00
Monroe	100.00%	111	111	98.94%	94	93	95.83%	120	115	98.06%	103	101	98.13
Montcalm	100.00%	91	91	100.00%	145	145	100.00%	148	148	100.00%	157	157	100.00
Muskegon	96.74%	276	267	97.41%	270	263	97.83%	276	270	96.91%	259	251	97.22
Newaygo	99.30%	143	142	99.23%	130	129	99.27%	137	136	98.36%	122	120	99.06
Northern Lakes	93.01%	515	479	90.00%	450	405	85.17%	445	379	94.66%	393	372	90.68
Northeast	98.60%	143	141	98.61%	144	142	100.00%	122	122	99.06%	106	105	99.03
North Country	93.05%	403	375	96.16%	443	426	99.44%	357	355	99.19%	370	367	96.82
Northpointe	100.00%	141	141	98.62%	145	143	98.60%	143	141	99.44%	179	178	99.18
Oakland	99.43%	701	697	99.34%	752	747	100.00%	743	743	99.43%	696	692	99.55
Ottawa	99.01%	203	201	98.19%	277	272	98.68%	151	149	93.98%	216	203	97.40
Pathways	97.10%	207	201	95.22%	230	219	92.07%	227	209	95.76%	165	158	94.93
Pines	100.00%	235	235	99.54%	216	215	98.60%	143	141	99.47%	187	186	99.49
Saginaw	95.00%	160	152	97.32%	149	145	94.07%	118	111	87.25%	149	130	93.40
Sanilac	100.00%	64	64	100.00%	73	73	100.00%	90	90	100.00%	68	68	100.00
Shiawassee	93.91%	115	108	93.33%	120	112	100.00%	104	104	98.35%	121	119	96.30
St. Clair	99.10%	221	219	99.55%	221	220	99.53%	211	210	99.00%	200	198	99.30
St. Joseph	91.67%	48	44	100.00%	111	111	98.43%	127	125	95.12%	123	117	97.07
Summit Pointe	95.59%	272	260	95.38%	325	310	99.36%	312	310	97.14%	454	441	96.92
Tuscola	97.75%	89	87	98.75%	80	79	87.80%	82	72	70.27%	74	52	89.23
Van Buren	100.00%	135	135	100.00%	158	158	100.00%	140	140	100.00%	130	130	100.00
Washtenaw	98.70%	154	152	97.35%	113	110	98.45%	129	127	100.00%	86	86	98.55
West Michigan	98.96%	193	191	100.00%	192	192	99.58%	240	239	98.34%	241	237	99.19
Woodlands	100.00%	116	116	100.00%	133	133	100.00%	114	114	100.00%	101	101	100.00
	96.88%	11,068	10,723	97.61%	11,759	11,478	97.73%	11,532	11,270	98.07%	11,739	11,513	

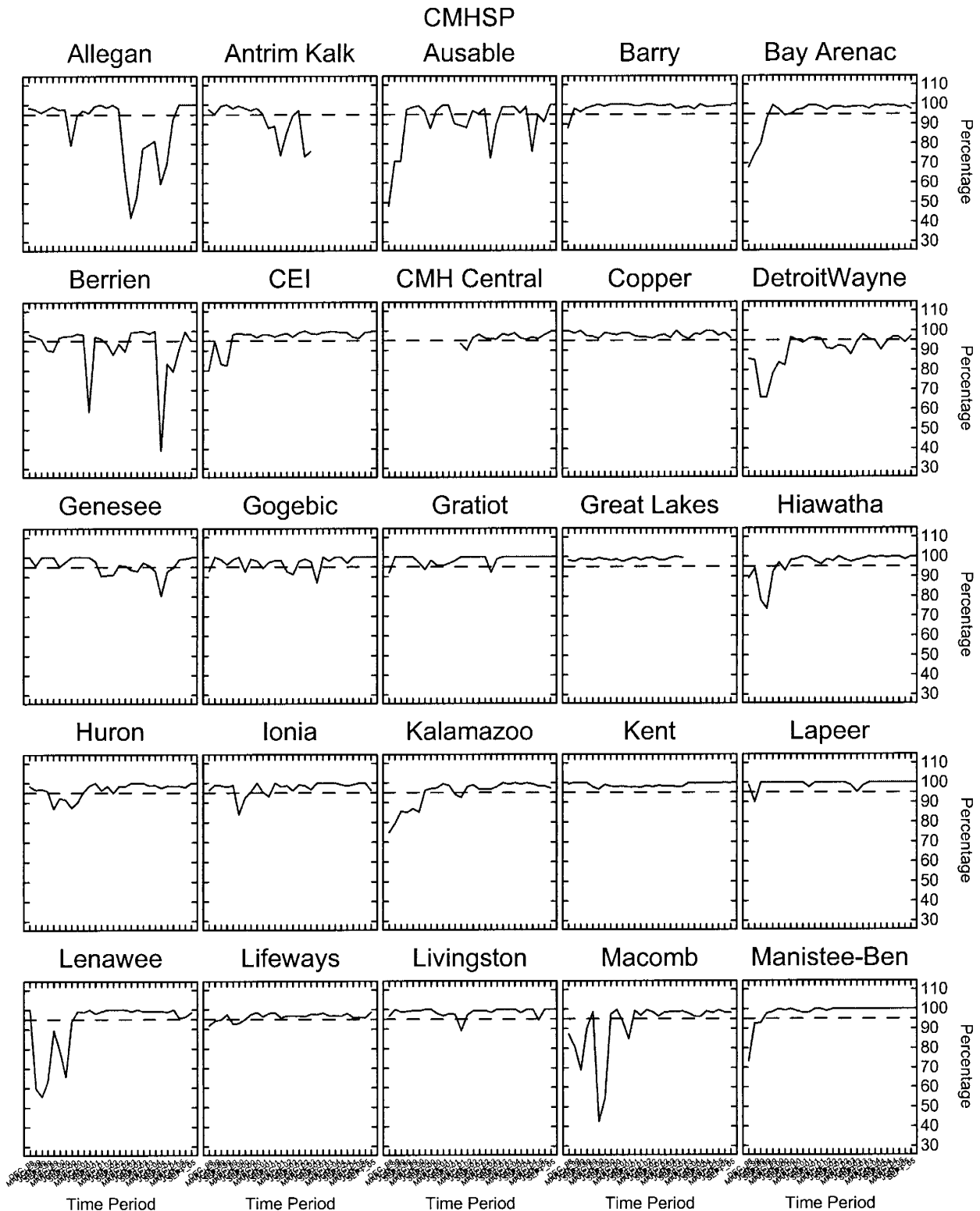
# Percentage of Persons Who Received a Face-to-Face Meeting with a Professional Within 14 Calendar Days of a Non-Emergent Request for Service



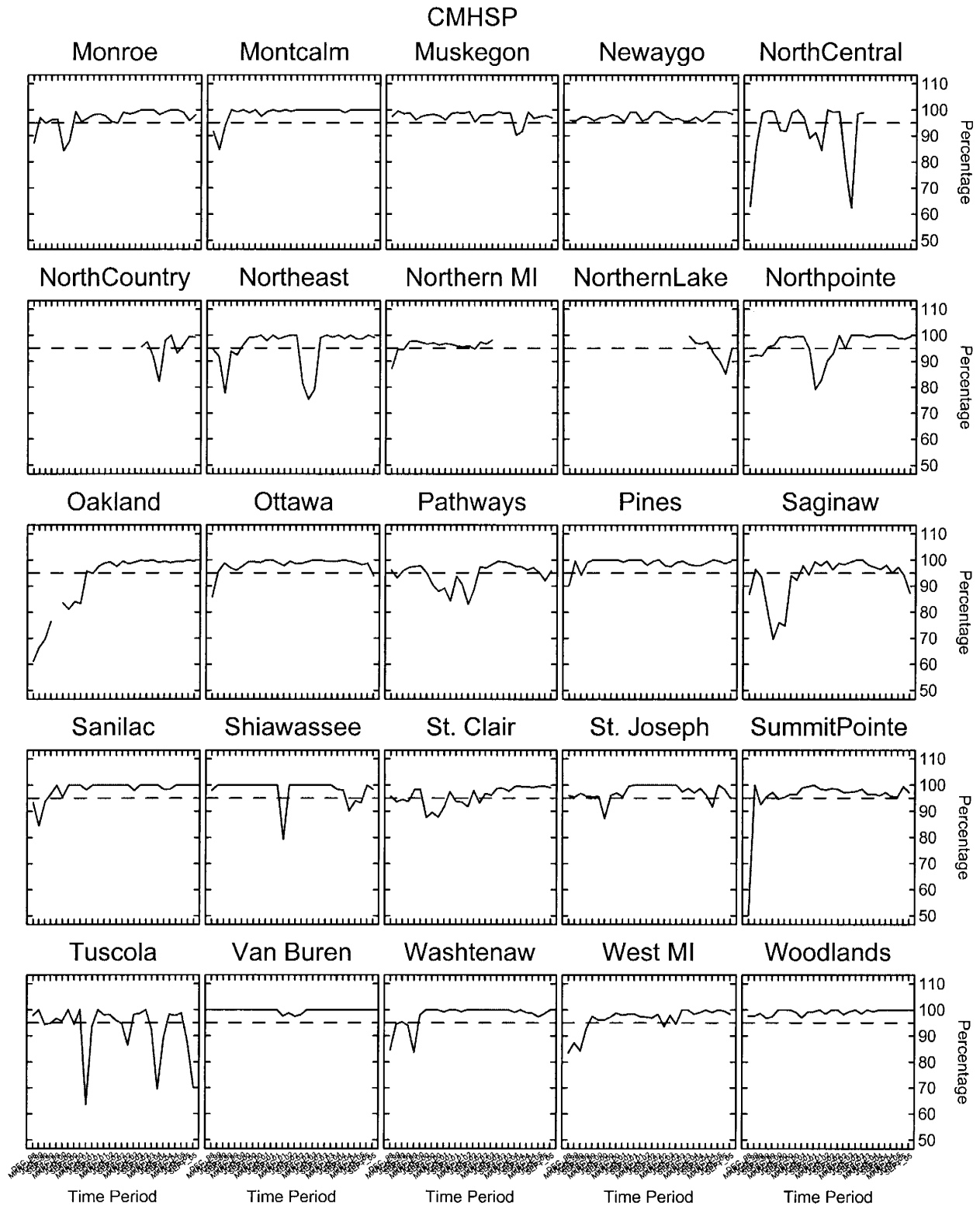
## Scatterplot 2: Meeting with a Professional



## Indicator No. 2 - Meeting with a Professional



# Indicator No. 2 - Page Two





*Indicator 2a. Access: Timeliness -- Percentage of children with emotional disturbance who received a face-to-face meeting with a professional within 14 calendar days of a non-emergent request for service. The standard is 95 percent within 14 days.*

**Rationale for Use:**

Quick, convenient entry into the mental health system is a critical aspect of accessibility of services. Delays in clinical and psychosocial assessment may lead to exacerbation of symptoms and distress and poorer role functioning. The amount of time between a request for service and clinical assessment with a professional is one measure of access to care.

**Method of Calculation:**

- **Numerator:** The number of children who received a face-to-face meeting with a professional within 14 calendar days of a non-emergent request for service.\
- **Denominator:** The total number of children who received a non-emergent face-to-face assessment with a professional during the reporting period.

A request for service occurs when a person, or someone on the person's behalf, asks that community mental health services be provided. If more than one request is made, time calculations should be based on the first. A face-to-face meeting means an assessment conducted by a mental health professional. Excluded from the definition of assessment are telephone screenings used to triage or prioritize consumers based on self-reported symptoms and problems. Also, consumers who request an appointment outside the 14 calendar day period, may be excluded from the indicator. Non-emergent assessment and services **exclude** pre-admission screening for and receipt of psychiatric in-patient care.

**Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	46	46	46	46
Minimum	70.000	87.500	75.000	70.000
Maximum	100.000	100.000	100.000	100.000
Median	100.000	100.000	100.000	100.000
Mean	96.996	97.465	96.475	97.557

**Comments:**

**Historical trends:** This indicator has been in place since FY '99. The trend line (lowest smooth line) of the longitudinal scatter plot shows a weak trend increasing from the 95 standard toward 100 percent. The scatterplot also shows that there was initially some slight variation or spread among the CMHSPs that has decreased across time.

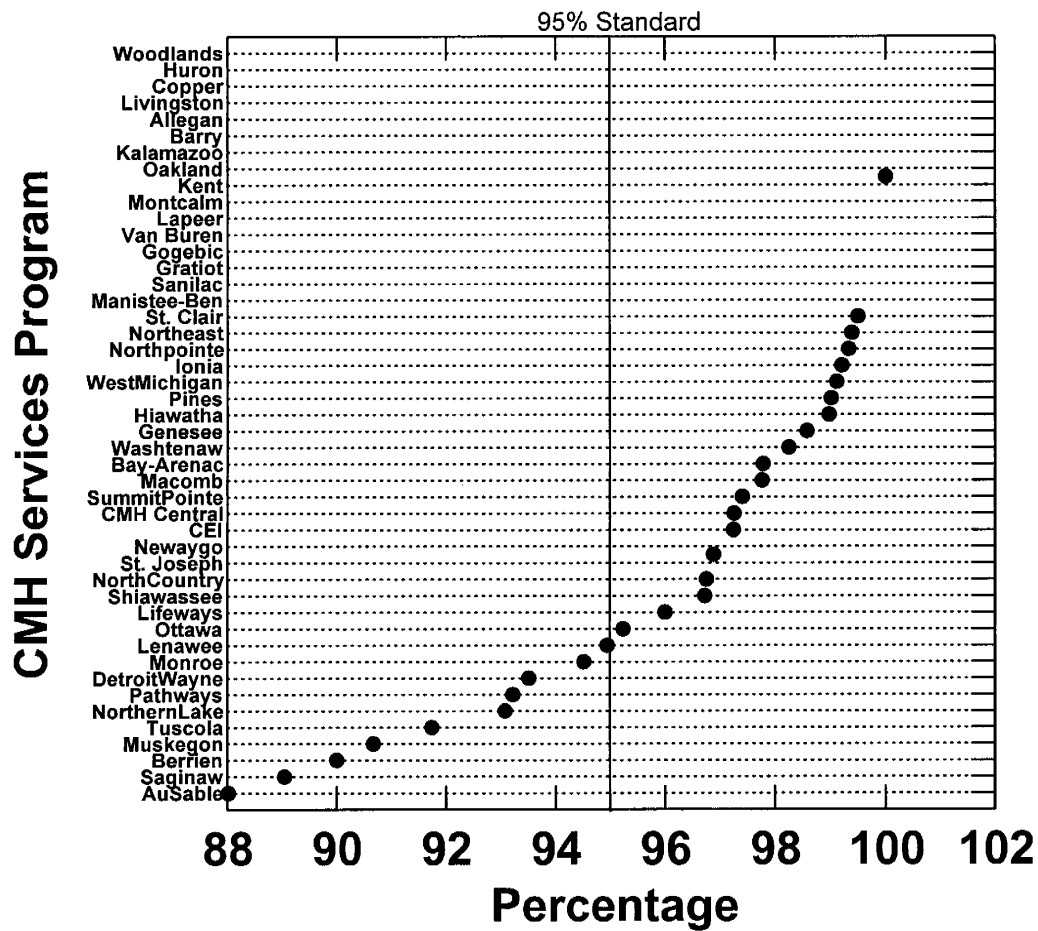
**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, 9 of the 46 CMHSPs did not meet the 95 percent standard. The CMHSPs failing to meet the standard are: Monroe (94.52%), Detroit/Wayne (93.51%), Pathways (93.22%), Northern Lakes (93.08%), Tuscola (91.74%), Muskegon (90.67%), Berrien (90%), Saginaw (89.05%), and AuSable (88.02%).

It should be noted that neither Muskegon nor Saginaw meet the 95 percent standard during any of the four quarters of FY '05.

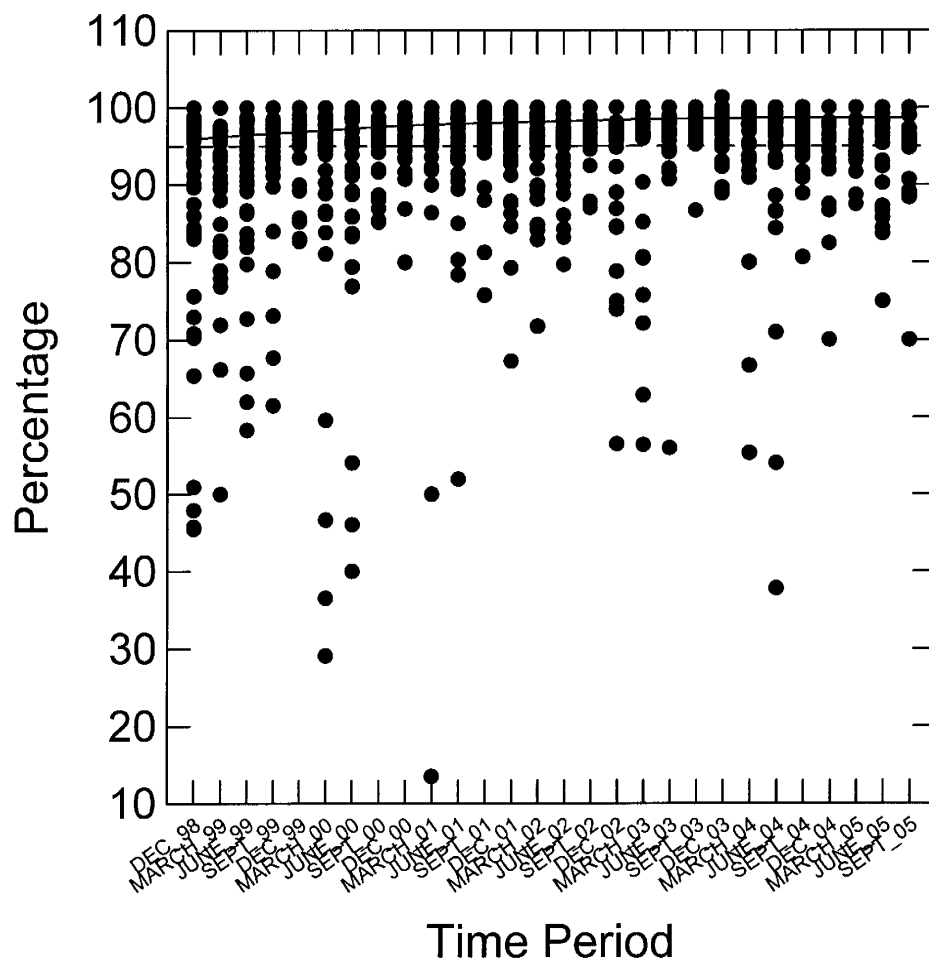
Indicator 2a: Percentage of Children with Emotional Disturbance Who Received a Face-to-Face Meeting with a Professional Within 14 Calendar Days of a Non-Emergent Request for Service

	October - December 2004			January - March 2005			April - June 2005			July - September 2005			Fiscal Year Percentage
	Percentage Q1	# MI Children Received Assessment Following 1st Request Q1	# MI Children Received Assessment within 14 Calendar Days Q1	Percentage Q2	# MI Children Received Assessment Following 1st Request Q2	# MI Children Received Assessment within 14 Calendar Days Q2	Percentage Q3	# MI Children Received Assessment Following 1st Request Q3	# MI Children Received Assessment within 14 Calendar Days Q3	Percentage Q4	# MI Children Received Assessment Following 1st Request Q4	# MI Children Received Assessment within 14 Calendar Days Q4	
Allegan	100.00%	36	36	100.00%	25	25	100.00%	25	25	100.00%	27	27	100.00
AuSable	70.00%	50	35	93.65%	63	59	83.72%	43	36	100.00%	61	61	88.02
Barry	100.00%	41	41	100.00%	43	43	100.00%	36	36	100.00%	40	40	100.00
Bay-Arenac	100.00%	102	102	95.77%	71	68	100.00%	66	66	94.81%	77	73	97.78
Berrien	82.46%	57	47	88.71%	62	55	100.00%	54	54	89.19%	37	33	90.00
CEI	97.54%	122	119	94.18%	292	275	99.20%	250	248	99.03%	207	205	97.24
CMH Central MI	98.19%	221	217	93.07%	202	188	98.26%	172	169	100.00%	169	169	97.25
Copper	100.00%	29	29	100.00%	35	35	100.00%	31	31	100.00%	11	11	100.00
Detroit-Wayne	92.88%	323	300	93.15%	336	313	92.37%	367	339	95.49%	377	360	93.51
Genesee	93.20%	103	96	98.39%	186	183	100.00%	187	187	100.00%	226	226	98.58
Gogebic	100.00%	27	27	100.00%	38	38	100.00%	30	30	100.00%	17	17	100.00
Gratiot	100.00%	26	26	100.00%	21	21	100.00%	13	13	100.00%	22	22	100.00
Hiawatha	100.00%	63	63	100.00%	50	50	95.35%	43	41	100.00%	40	40	98.98
Huron	100.00%	26	26	100.00%	26	26	100.00%	34	34	100.00%	18	18	100.00
Ionia	100.00%	49	49	100.00%	31	31	100.00%	18	18	96.55%	29	28	99.21
Kalamazoo	100.00%	38	38	100.00%	44	44	100.00%	47	47	100.00%	41	41	100.00
Kent	100.00%	159	159	100.00%	147	147	100.00%	124	124	100.00%	98	98	100.00
Lapeer	100.00%	15	15	100.00%	12	12	100.00%	11	11	100.00%	13	13	100.00
Lenawee	100.00%	21	21	87.50%	24	21	93.10%	29	27	100.00%	25	25	94.95
Lifeways	94.59%	37	35	100.00%	30	30	85.71%	14	12	100.00%	19	19	96.00
Livingston	100.00%	26	26	100.00%	13	13	100.00%	15	15	100.00%	20	20	100.00
Macomb	97.52%	121	118	100.00%	92	92	97.13%	174	169	97.30%	148	144	97.76
Manistee-Benzie	100.00%	39	39	100.00%	33	33	100.00%	21	21	100.00%	5	5	100.00
Monroe	100.00%	22	22	95.45%	22	21	85.71%	21	18	100.00%	8	8	94.52
Montcalm	100.00%	32	32	100.00%	58	58	100.00%	33	33	100.00%	41	41	100.00
Muskegon	91.94%	62	57	91.67%	60	55	90.24%	41	37	88.71%	62	55	90.67
Newaygo	97.78%	45	44	96.77%	31	30	96.67%	30	29	95.45%	22	21	96.88
Northern Lakes	96.53%	202	195	94.71%	170	161	84.42%	154	130	96.36%	110	106	93.08
Northeast	100.00%	46	46	98.00%	50	49	100.00%	41	41	100.00%	28	28	99.39
North Country	94.38%	160	151	95.76%	165	158	98.36%	122	120	100.00%	106	106	96.75
Northpointe	100.00%	43	43	100.00%	40	40	97.30%	37	36	100.00%	30	30	99.33
Oakland	100.00%	104	104	100.00%	122	122	100.00%	94	94	100.00%	99	99	100.00
Ottawa	100.00%	37	37	94.29%	70	66	97.44%	39	38	90.70%	43	39	95.24
Pathways	96.43%	56	54	93.83%	81	76	87.27%	55	48	95.45%	44	42	93.22
Pines	100.00%	74	74	100.00%	64	64	75.00%	8	6	100.00%	59	59	99.02
Saginaw	87.50%	64	56	93.10%	58	54	86.67%	45	39	88.37%	43	38	89.05
Sanilac	100.00%	14	14	100.00%	24	24	100.00%	22	22	100.00%	4	4	100.00
Shiawassee	95.83%	24	23	93.75%	48	45	100.00%	27	27	100.00%	23	23	96.72
St. Clair	98.04%	51	50	100.00%	41	41	100.00%	59	59	100.00%	48	48	99.50
St. Joseph	86.67%	15	13	100.00%	34	34	100.00%	37	37	95.24%	42	40	96.88
Summit Pointe	95.74%	94	90	95.74%	94	90	99.02%	102	101	98.95%	95	94	97.40
Tuscola	94.59%	37	35	100.00%	25	25	96.30%	27	26	70.00%	20	14	91.74
Van Buren	100.00%	46	46	100.00%	36	36	100.00%	29	29	100.00%	24	24	100.00
Washtenaw	100.00%	47	47	95.89%	73	70	98.59%	71	70	100.00%	38	38	98.25
West Michigan	100.00%	56	56	100.00%	54	54	100.00%	68	68	96.00%	50	48	99.12
Woodlands	100.00%	39	39	100.00%	58	58	100.00%	44	44	100.00%	32	32	100.00
	96.49%	3,101	2,992	96.39%	3,354	3,233	96.51%	3,010	2,905	97.64%	2,798	2,732	

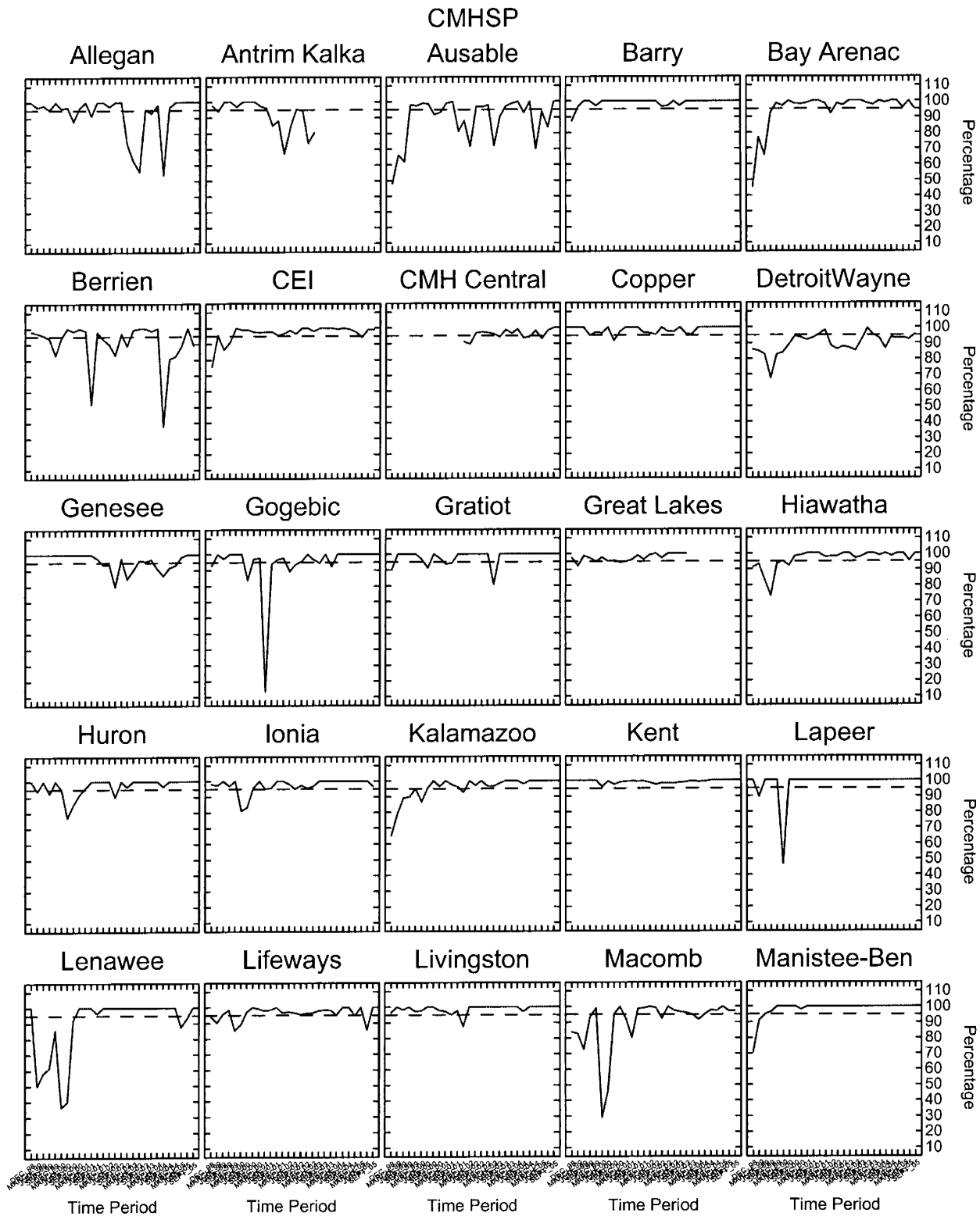
# Percentage of Children with Emotional Disturbance Who Received a Face-to-Face Meeting with a Professional Within 14 Calendar Days of a Non-Emergent Request for Service



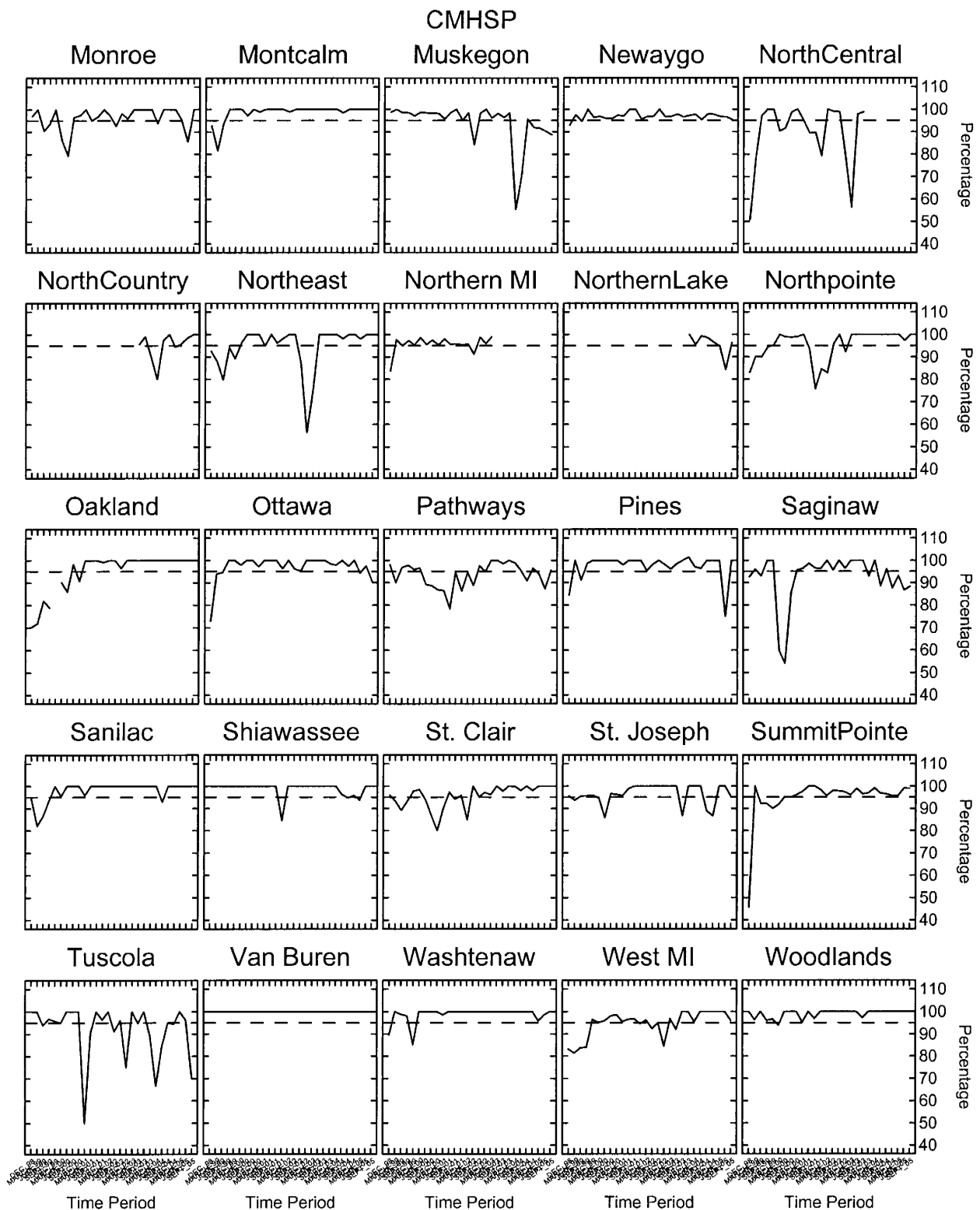
Scatterplot 2a: Meeting with a Professional  
(Children with Emotional Disturbance)



# Indicator No. 2a - Meeting with a Professional (Children with Emotional Disturbance)



# Indicator No. 2a - Page Two



*Indicator 2b. Access: Timeliness -- Percentage of adults with mental illness who received a face-to-face meeting with a professional within 14 calendar days of a non-emergent request for service. The standard is 95 percent within 14 days.*

**Rationale for Use:**

Quick, convenient entry into the mental health system is a critical aspect of accessibility of services. Delays in clinical and psychosocial assessment may lead to exacerbation of symptoms and distress and poorer role functioning. The amount of time between a request for service and clinical assessment with a professional is one measure of access to care.

**Method of Calculation:**

- **Numerator:** The number of adults with mental illness who received a face-to-face meeting with a professional within 14 calendar days of a non-emergent request for service.
- **Denominator:** The total number of adults with mental illness who received a non-emergent face-to-face assessment with a professional during the reporting period.

A request for service occurs when a person, or someone on the person's behalf, asks that community mental health services be provided. If more than one request is made, time calculations should be based on the first. A face-to-face meeting means an assessment conducted by a mental health professional. Excluded from the definition of assessment are telephone screenings used to triage or prioritize consumers based on self-reported symptoms and problems. Also, consumers who request an appointment outside the 14 calendar day period, may be excluded from the indicator. Non-emergent assessment and services **exclude** pre-admission screening for and receipt of psychiatric in-patient care.

**Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	46	46	46	46
Minimum	77.420	86.380	83.670	69.810
Maximum	100.000	100.000	100.000	100.000
Median	99.100	99.335	99.310	99.180
Mean	97.246	98.110	98.251	97.800

**Comments:**

**Historical trends:** This indicator has been in place since FY '99. The trend line (lowess smooth line) of the longitudinal scatter plot shows a weak trend increasing from the 95 standard toward 100 percent. The scatterplot also shows that there was initially some slight variation or spread among the CMHSPs that has decreased across time.

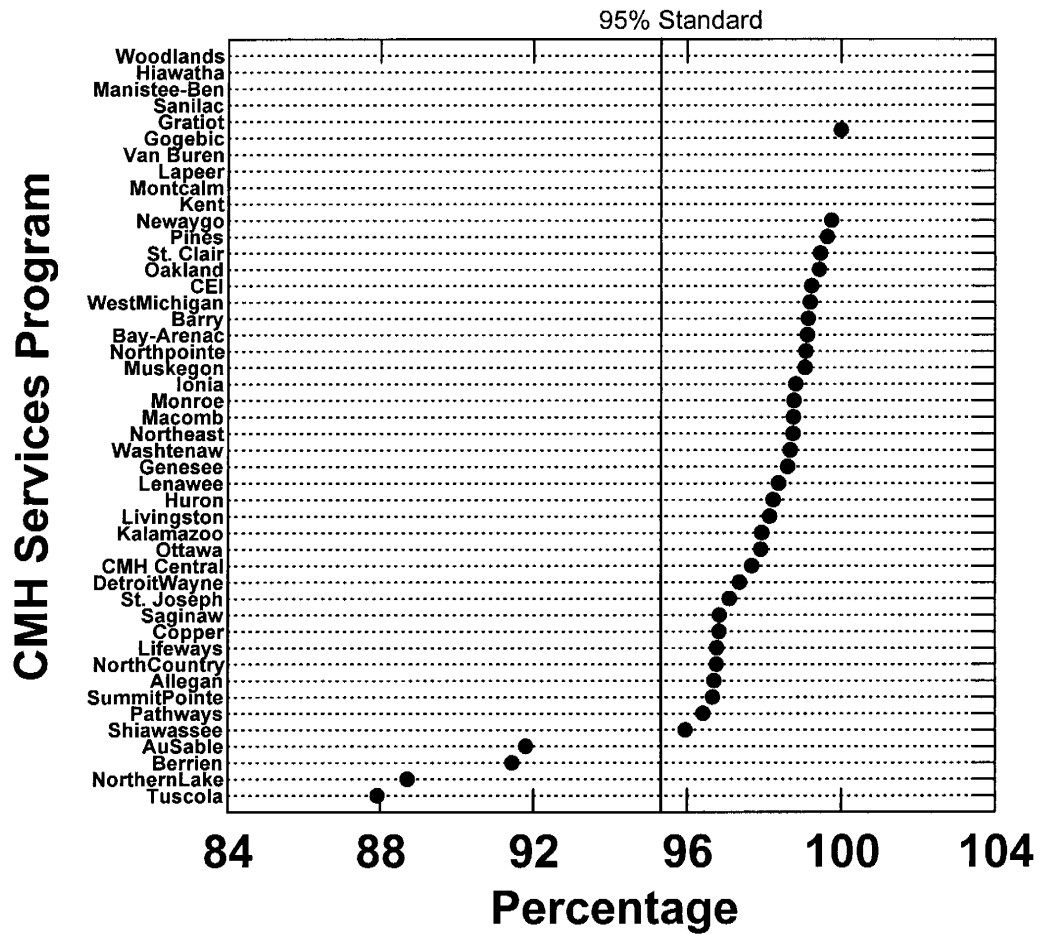
**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, 4 of the 46 CMHSPs did not meet the 95 percent standard. The CMHSPs failing to meet the standard are AuSable (91.80%), Berrien (91.44%), Northern Lakes (88.70%), Tuscola (87.92%). It should be noted that Northern Lakes did not meet the 95 percent standard for any quarter during FY '05.

Indicator 2b: Percentage of Adults with Mental Illness Who Received a Face-to-Face Meeting with a Professional Within 14 Calendar Days of a Non-Emergent Request for Service

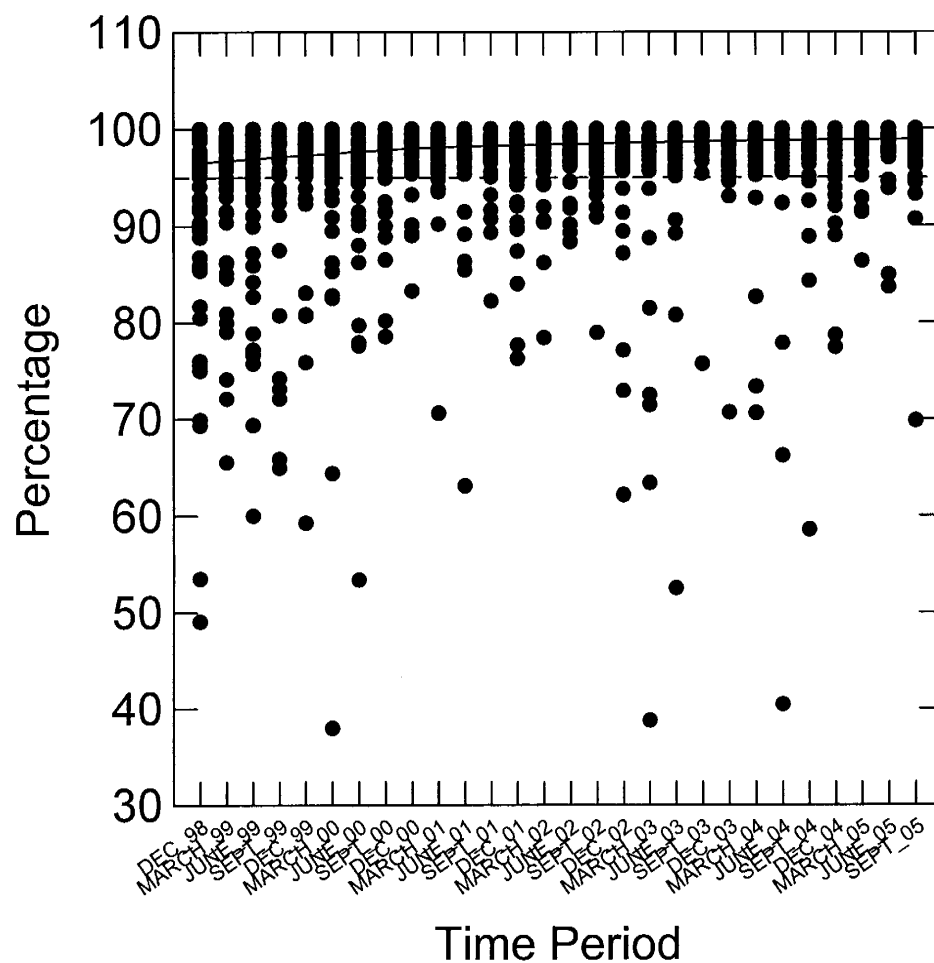
	October - December 2004			January - March 2005			April - June 2005			July - September 2005			
	Percentage Q1	# MI Adults Received Assessment Following 1st Request Q1	# MI Adults Received Assessment within 14 Calendar Days Q1	Percentage Q2	# MI Adults Received Assessment Following 1st Request Q2	# MI Adults Received Assessment within 14 Calendar Days Q2	Percentage Q3	# MI Adults Received Assessment Following 1st Request Q3	# MI Adults Received Assessment within 14 Calendar Days Q3	Percentage Q4	# MI Adults Received Assessment Following 1st Request Q4	# MI Adults Received Assessment within 14 Calendar Days Q4	Fiscal Year Percentage
Allegan	89.00%	100	89	100.00%	66	66	100.00%	92	92	100.00%	76	76	96.71
AuSable	77.42%	124	96	95.20%	125	119	93.86%	114	107	99.33%	149	148	91.80
Barry	98.32%	119	117	99.19%	124	123	99.12%	114	113	100.00%	110	110	99.14
Bay-Arenac	98.95%	191	189	99.45%	182	181	98.68%	151	149	99.36%	156	155	99.12
Berrien	78.70%	216	170	91.40%	221	202	99.52%	209	208	96.33%	218	210	91.44
CEI	95.77%	71	68	100.00%	140	140	99.48%	194	193	100.00%	116	116	99.23
CMH Central MI	96.18%	445	428	97.39%	498	485	98.02%	405	397	99.15%	469	465	97.69
Copper	100.00%	21	21	95.24%	42	40	98.18%	55	54	95.00%	40	38	96.84
Detroit-Wayne	99.41%	505	502	98.66%	524	517	94.69%	659	624	97.45%	824	803	97.37
Genesee	94.90%	353	335	98.97%	580	574	99.01%	609	603	99.74%	766	764	98.61
Gogebic	100.00%	46	46	100.00%	61	61	100.00%	32	32	100.00%	27	27	100.00
Graiot	100.00%	39	39	100.00%	35	35	100.00%	30	30	100.00%	14	14	100.00
Hiawatha	100.00%	74	74	100.00%	70	70	100.00%	74	74	100.00%	61	61	100.00
Huron	97.22%	36	35	97.56%	41	40	98.04%	51	50	100.00%	42	42	98.24
Ionia	98.75%	80	79	100.00%	87	87	100.00%	93	93	96.15%	78	75	98.82
Kalamazoo	99.21%	127	126	97.52%	121	118	97.44%	117	114	97.56%	123	120	97.95
Kent	100.00%	1,042	1,042	100.00%	941	941	100.00%	895	895	100.00%	839	839	100.00
Lapeer	100.00%	70	70	100.00%	61	61	100.00%	72	72	100.00%	81	81	100.00
Lenawee	100.00%	80	80	97.67%	86	84	97.94%	97	95	98.13%	107	105	98.38
Lifeways	97.11%	173	168	95.18%	166	158	97.03%	101	98	98.32%	119	117	96.78
Livingston	100.00%	53	53	91.67%	36	33	100.00%	35	35	100.00%	38	38	98.15
Macomb	98.99%	298	295	99.35%	309	307	98.75%	400	395	98.20%	444	436	98.76
Manistee-Benzie	100.00%	52	52	100.00%	57	57	100.00%	56	56	100.00%	31	31	100.00
Monroe	100.00%	79	79	100.00%	66	66	97.80%	91	89	97.73%	88	86	98.77
Montcalm	100.00%	57	57	100.00%	86	86	100.00%	109	109	100.00%	114	114	100.00
Muskegon	98.92%	186	184	98.91%	183	181	99.00%	200	198	99.43%	174	173	99.06
Newaygo	100.00%	96	96	100.00%	96	96	100.00%	106	106	98.97%	97	96	99.75
Northern Lakes	90.21%	286	258	86.38%	257	222	84.96%	266	226	93.28%	253	236	88.70
Northeast	97.67%	86	84	98.84%	86	85	100.00%	75	75	98.65%	74	73	98.75
North Country	92.05%	239	220	96.31%	271	261	100.00%	225	225	98.83%	257	254	96.77
Northpointe	100.00%	97	97	98.04%	102	100	98.99%	99	98	99.28%	138	137	99.08
Oakland	99.28%	553	549	99.28%	556	552	100.00%	509	509	99.18%	487	483	99.43
Ottawa	98.73%	158	156	99.50%	200	199	99.05%	105	104	94.48%	163	154	97.92
Pathways	97.84%	139	136	96.48%	142	137	94.52%	146	138	97.12%	104	101	96.42
Pines	100.00%	156	156	99.32%	148	147	100.00%	128	128	99.20%	125	124	99.64
Saginaw	100.00%	75	75	100.00%	73	73	98.08%	52	51	90.70%	86	78	96.85
Sanilac	100.00%	46	46	100.00%	44	44	100.00%	62	62	100.00%	56	56	100.00
Shiawassee	93.10%	87	81	92.86%	70	65	100.00%	73	73	97.80%	91	89	95.95
St. Clair	100.00%	152	152	99.37%	158	157	99.22%	128	127	99.18%	122	121	99.46
St. Joseph	93.94%	33	31	100.00%	77	77	97.75%	89	87	94.87%	78	74	97.11
Summit Pointe	95.40%	174	166	95.18%	228	217	99.51%	204	203	96.63%	356	344	96.67
Tuscola	100.00%	51	51	98.15%	54	53	83.67%	49	41	69.81%	53	37	87.92
Van Buren	100.00%	83	83	100.00%	110	110	100.00%	100	100	100.00%	102	102	100.00
Washtenaw	97.73%	44	43	100.00%	25	25	97.83%	46	45	100.00%	36	36	98.68
West Michigan	98.50%	133	131	100.00%	135	135	99.40%	168	167	98.92%	165	183	99.19
Woodlands	100.00%	67	67	100.00%	70	70	100.00%	66	66	100.00%	65	65	100.00
	97.02%	7,392	7,172	98.04%	7,810	7,657	98.13%	7,751	7,606	98.24%	8,232	8,087	



# Percentage of Adults with Mental Illness Who Received a Face-to-Face Meeting with a Professional Within 14 Calendar Days of a Non-Emergent Request for Service

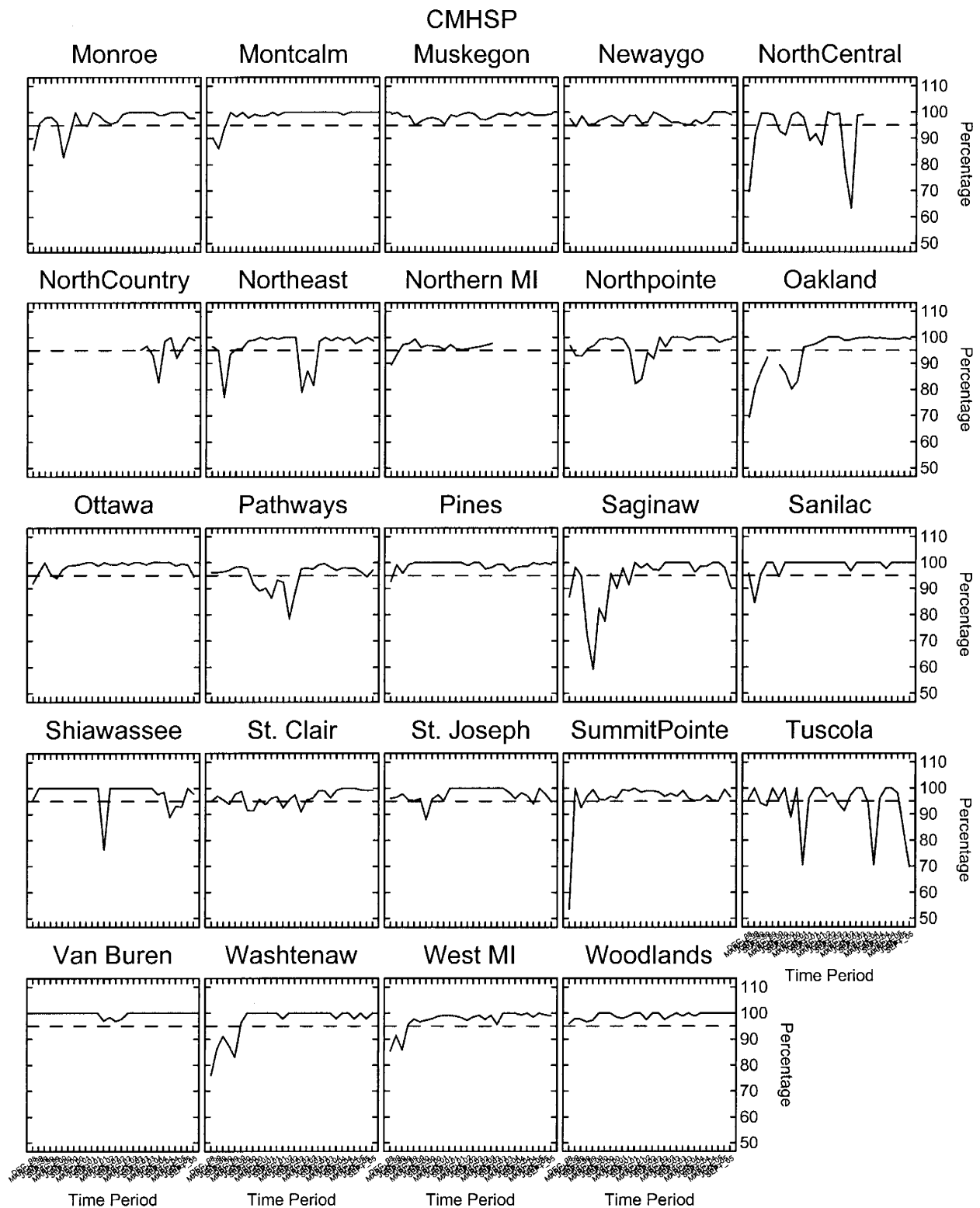


Scatterplot 2b: Meeting with a Professional  
(Adults with Mental Illness)





## Indicator No. 2b - Page Two



*Indicator 2c. Access: Timeliness -- Percentage of children with a developmental disability who received a face-to-face meeting with a professional within 14 calendar days of a non-emergent request for service. The standard is 95 percent within 14 days.*

**Rationale for Use:**

Quick, convenient entry into the mental health system is a critical aspect of accessibility of services. Delays in clinical and psychosocial assessment may lead to exacerbation of symptoms and distress and poorer role functioning. The amount of time between a request for service and clinical assessment with a professional is one measure of access to care.

**Method of Calculation:**

- **Numerator:** The number of children with a developmental disability who received a face-to-face meeting with a professional within 14 calendar days of a non-emergent request for service.
- **Denominator:** The total number of children with a developmental disability who received a non-emergent face-to-face assessment with a professional during the reporting period.

A request for service occurs when a person, or someone on the person's behalf, asks that community mental health services be provided. If more than one request is made, time calculations should be based on the first. A face-to-face meeting means an assessment conducted by a mental health professional. Excluded from the definition of assessment are telephone screenings used to triage or prioritize consumers based on self-reported symptoms and problems. Also, consumers who request an appointment outside the 14 calendar day period, may be excluded from the indicator. Non-emergent assessment and services **exclude** pre-admission screening for and receipt<sup>2</sup> of psychiatric in-patient care.

**Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	33	33	37	38
Minimum	66.670	66.670	75.000	60.000
Maximum	100.000	100.000	100.000	100.000
Median	100.000	100.000	100.000	100.000
Mean	96.944	98.864	98.517	97.346

**Comments:**

**Historical trends:** This indicator has been in place since FY '02. The trend line (lowest smooth line) of the longitudinal scatter plot shows a flat trend line at 100 percent that is clearly above the 95 percent standard. The scatterplot also shows that there is very little variation or spread among the CMHSPs.

**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, 6 of the 46 CMHSPs did not meet the 95 percent standard. The CMHSPs failing to meet the standard are: Saginaw (93.75%), Pathways (93.1%), CMH Central (92.86%\*), Bay-Arenac (92.31%\*), Lenawee (87.5%\*), and Lifeways (75.0%\*)

It should be noted that Summit Pointe and Berrien report that for FY05 they did not receive any non-emergent requests for service for children with developmental disabilities.

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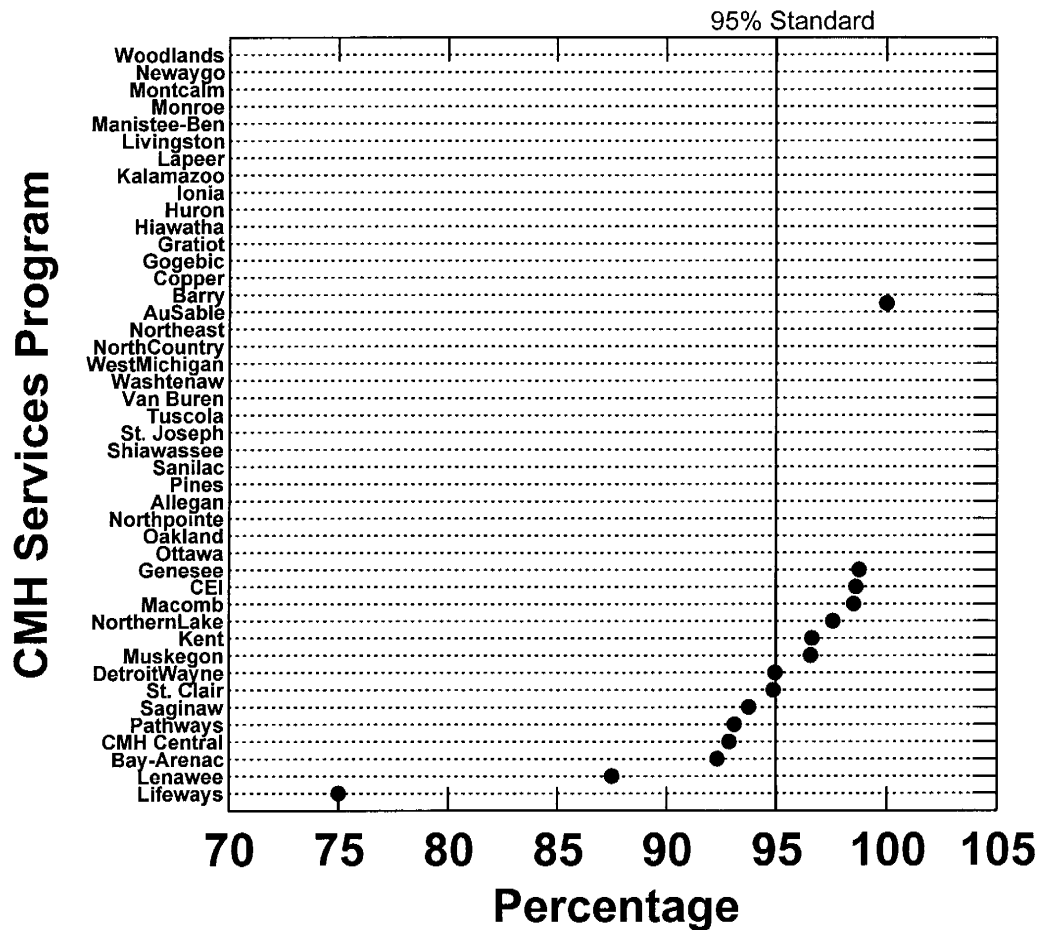
<sup>2</sup> \* Percentage based on fewer than 20 consumers.

Indicator 2c: Percentage of Children with Developmental Disabilities Who Received a Face-to-Face Meeting with a Professional Within 14 Calendar Days of a Non-Emergent Request for Service

	October - December 2004			January - March 2005			April - June 2005			July - September 2005			Fiscal Year Percentage
	Percentage Q1	# DD Children Received Assessment Following 1st Request Q1	# DD Children Received Assessment within 14 Calendar Days Q1	Percentage Q2	# DD Children Received Assessment Following 1st Request Q2	# DD Children Received Assessment within 14 Calendar Days Q2	Percentage Q3	# DD Children Received Assessment Following 1st Request Q3	# DD Children Received Assessment within 14 Calendar Days Q3	Percentage Q4	# DD Children Received Assessment Following 1st Request Q4	# DD Children Received Assessment within 14 Calendar Days Q4	
Allegan	100.00%	2	2	100.00%	1	1	100.00%	1	1	100.00%	1	1	100.00 *
AuSable	-	0	0	-	0	0	-	0	0	100.00%	1	1	100.00 *
Barry	-	0	0	-	0	0	100.00%	3	3	-	0	0	100.00 *
Bay-Arenac	100.00%	4	4	100.00%	2	2	100.00%	4	4	66.67%	3	2	92.31 *
Berrien	-	0	0	-	0	0	-	0	0	-	0	0	
CEI	100.00%	7	7	100.00%	25	25	94.44%	18	17	100.00%	22	22	98.61
CMH Central MI	100.00%	2	2	66.67%	3	2	100.00%	7	7	100.00%	2	2	92.86 *
Copper	-	0	0	-	0	0	100.00%	1	1	100.00%	1	1	100.00 *
Detroit-Wayne	86.67%	15	13	95.83%	24	23	95.00%	20	19	100.00%	20	20	94.94
Genesee	96.00%	25	24	100.00%	39	39	97.83%	46	45	100.00%	51	51	98.76
Gogebic	100.00%	2	2	100.00%	2	2	100.00%	4	4	-	0	0	100.00 *
Griatiot	100.00%	3	3	-	0	0	-	0	0	100.00%	1	1	100.00 *
Hiawatha	100.00%	3	3	100.00%	3	3	100.00%	6	6	100.00%	9	9	100.00
Huron	-	0	0	-	0	0	100.00%	1	1	100.00%	2	2	100.00 *
Ionia	100.00%	1	1	100.00%	4	4	100.00%	1	1	100.00%	1	1	100.00 *
Kalamazoo	100.00%	9	9	100.00%	6	6	100.00%	11	11	100.00%	8	8	100.00
Kent	93.75%	16	15	100.00%	12	12	100.00%	13	13	94.44%	18	17	96.61
Lapeer	100.00%	2	2	100.00%	2	2	-	0	0	100.00%	3	3	100.00 *
Lenawee	100.00%	1	1	100.00%	2	2	75.00%	4	3	100.00%	1	1	87.50 *
Lifeways	66.67%	6	4	-	0	0	100.00%	2	2	-	0	0	75.00 *
Livingston	100.00%	3	3	-	0	0	100.00%	4	4	100.00%	2	2	100.00 *
Macomb	90.91%	11	10	100.00%	17	17	100.00%	13	13	100.00%	26	26	98.51
Manistee-Benzie	-	0	0	-	0	0	100.00%	1	1	-	0	0	100.00 *
Monroe	100.00%	8	8	100.00%	2	2	100.00%	4	4	100.00%	1	1	100.00
Montcalm	100.00%	1	1	100.00%	1	1	100.00%	4	4	100.00%	1	1	100.00 *
Muskegon	81.82%	11	9	100.00%	8	8	100.00%	26	26	100.00%	13	13	96.55
Newaygo	-	0	0	100.00%	1	1	-	0	0	100.00%	1	1	100.00 *
Northern Lakes	100.00%	12	12	100.00%	8	8	90.00%	10	9	100.00%	11	11	97.56
Northeast	100.00%	3	3	100.00%	3	3	100.00%	1	1	-	0	0	100.00 *
North Country	100.00%	2	2	100.00%	5	5	100.00%	6	6	100.00%	4	4	100.00 *
Northpointe	-	0	0	100.00%	1	1	100.00%	2	2	100.00%	6	6	100.00 *
Oakland	100.00%	19	19	100.00%	34	34	100.00%	73	73	100.00%	47	47	100.00
Ottawa	-	0	0	-	0	0	100.00%	1	1	100.00%	2	2	100.00 *
Pathways	100.00%	5	5	100.00%	3	3	92.86%	14	13	85.71%	7	6	93.10
Pines	100.00%	1	1	100.00%	2	2	100.00%	1	1	100.00%	1	1	100.00 *
Saginaw	100.00%	7	7	100.00%	10	10	100.00%	10	10	60.00%	5	3	93.75
Sanilac	100.00%	1	1	100.00%	3	3	100.00%	3	3	100.00%	3	3	100.00 *
Shiawassee	-	0	0	100.00%	1	1	100.00%	2	2	100.00%	1	1	100.00 *
St. Clair	83.33%	6	5	100.00%	9	9	100.00%	11	11	92.31%	13	12	94.87
St. Joseph	-	0	0	-	0	0	-	0	0	100.00%	3	3	100.00 *
Summit Pointe	-	0	0	-	0	0	-	0	0	-	0	0	
Tuscola	-	0	0	-	0	0	100.00%	1	1	-	0	0	100.00 *
Van Buren	100.00%	5	5	100.00%	4	4	100.00%	4	4	100.00%	2	2	100.00 *
Washtenaw	100.00%	49	49	100.00%	3	3	100.00%	8	8	100.00%	5	5	100.00
West Michigan	100.00%	4	4	100.00%	3	3	-	0	0	100.00%	1	1	100.00 *
Woodlands	100.00%	4	4	100.00%	3	3	-	0	0	100.00%	2	2	100.00 *
	96.00%	250	240	99.19%	246	244	98.24%	341	335	98.01%	301	295	

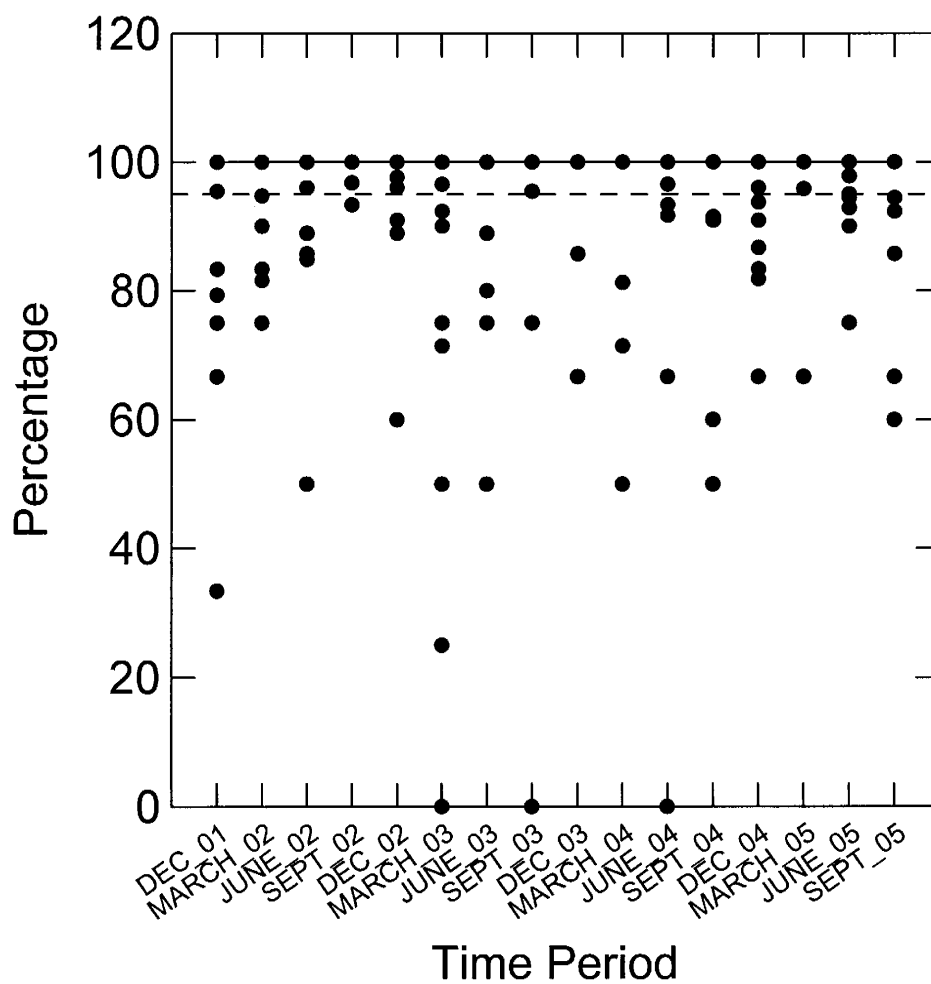
\* Percentage based on fewer than 20 consumers.

# Percentage of DD Children Who Received a Face-to-Face Meeting with a Professional Within 14 Calendar Days of a Non-Emergent Request for Service



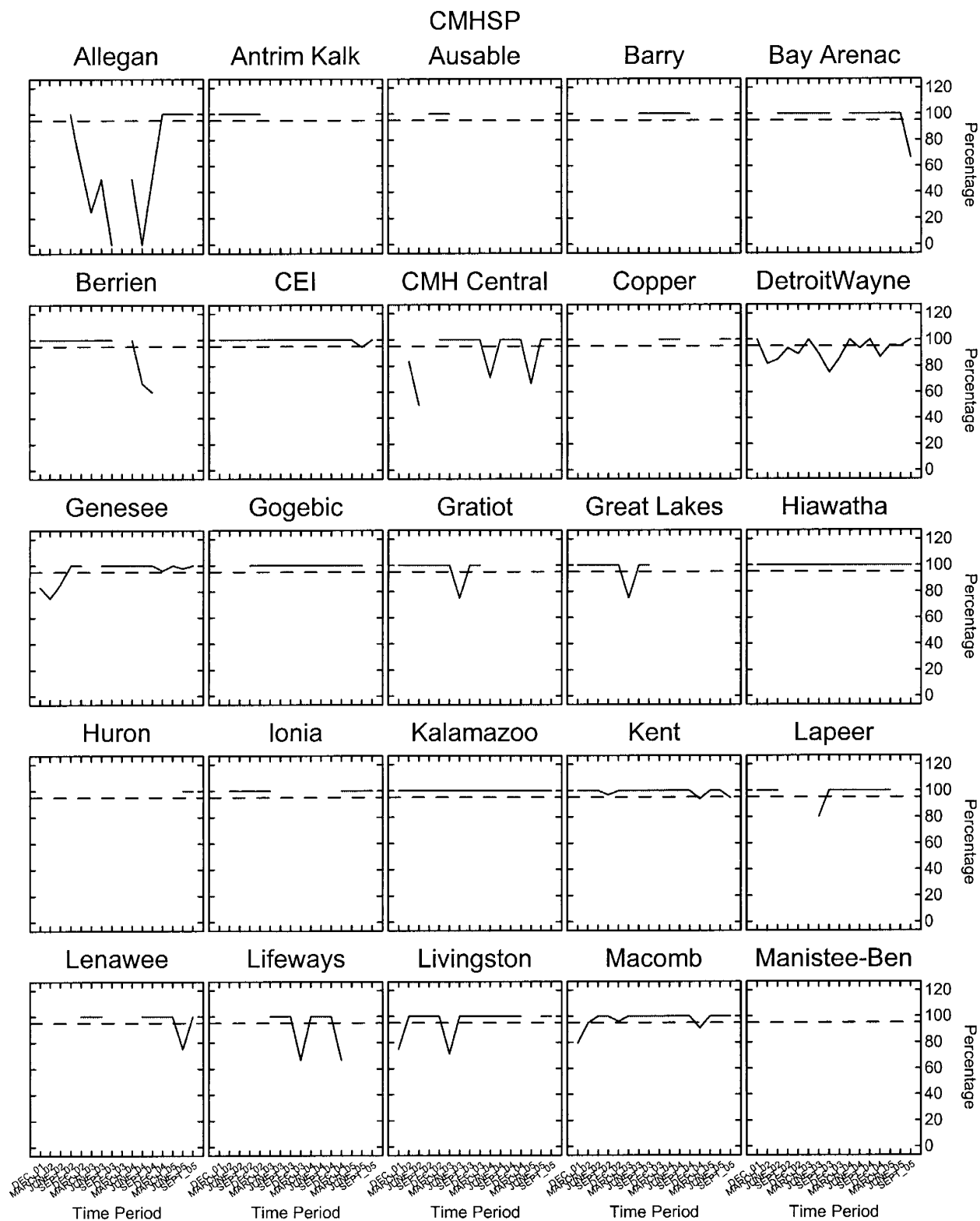
# Scatterplot 2c: Meeting with a Professional

(Children with Developmental Disabilities)

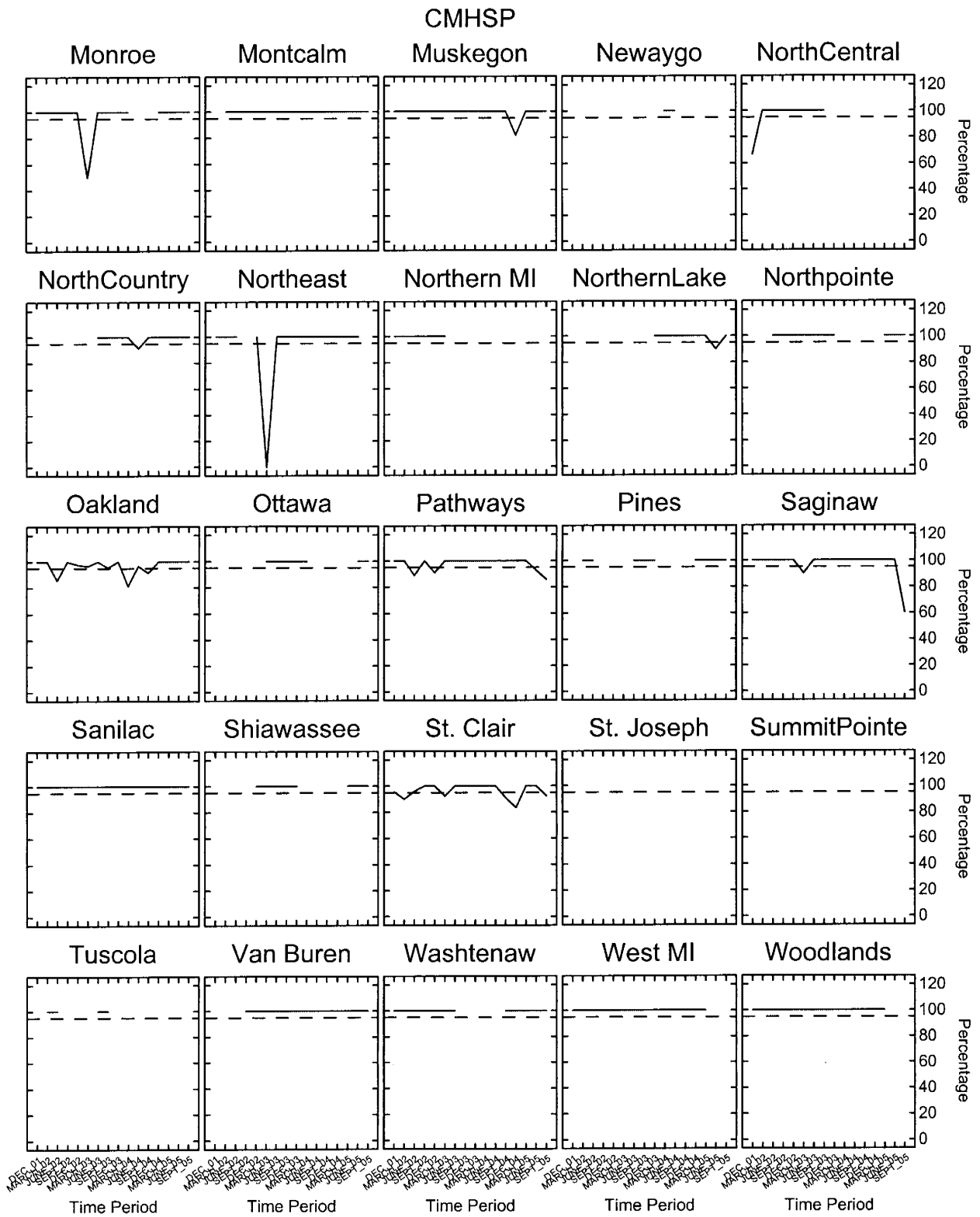




# Indicator No. 2c - Meeting with a Professional (Children with Developmental Disabilities)



# Indicator No. 2c - Page Two



*Indicator 2d. Access: Timeliness -- Percentage of adults with a developmental disability who received a face-to-face meeting with a professional within 14 calendar days of a non-emergent request for service. The standard is 95 percent within 14 days.*

**Rationale for Use:**

Quick, convenient entry into the mental health system is a critical aspect of accessibility of services. Delays in clinical and psychosocial assessment may lead to exacerbation of symptoms and distress and poorer role functioning. The amount of time between a request for service and clinical assessment with a professional is one measure of access to care.

**Method of Calculation:**

- **Numerator:** The number of adults with a developmental disability who received a face-to-face meeting with a professional within 14 calendar days of a non-emergent request for service.
- **Denominator:** The total number of adults with a developmental disability who received a non-emergent face-to-face assessment with a professional during the reporting period.

A request for service occurs when a person, or someone on the person's behalf, asks that community mental health services be provided. If more than one request is made, time calculations should be based on the first. A face-to-face meeting means an assessment conducted by a mental health professional. Excluded from the definition of assessment are telephone screenings used to triage or prioritize consumers based on self-reported symptoms and problems. Also, consumers who request an appointment outside the 14 calendar day period, may be excluded from the indicator. Non-emergent assessment and services **exclude** pre-admission screening for and receipt of psychiatric in-patient care.

**Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	42	42	44	43
Minimum	85.710	75.000	75.000	73.330
Maximum	100.000	100.000	100.000	100.000
Median	100.000	100.000	100.000	100.000
Mean	99.066	99.030	98.163	98.176

**Comments:**

**Historical trends:** This indicator has been in place since FY '02. The trend line (lowess smooth line) of the longitudinal scatter plot shows a flat trend line at 100 percent that is clearly above the 95 percent standard. The scatterplot also shows that there is very little variation or spread among the CMHSPs.

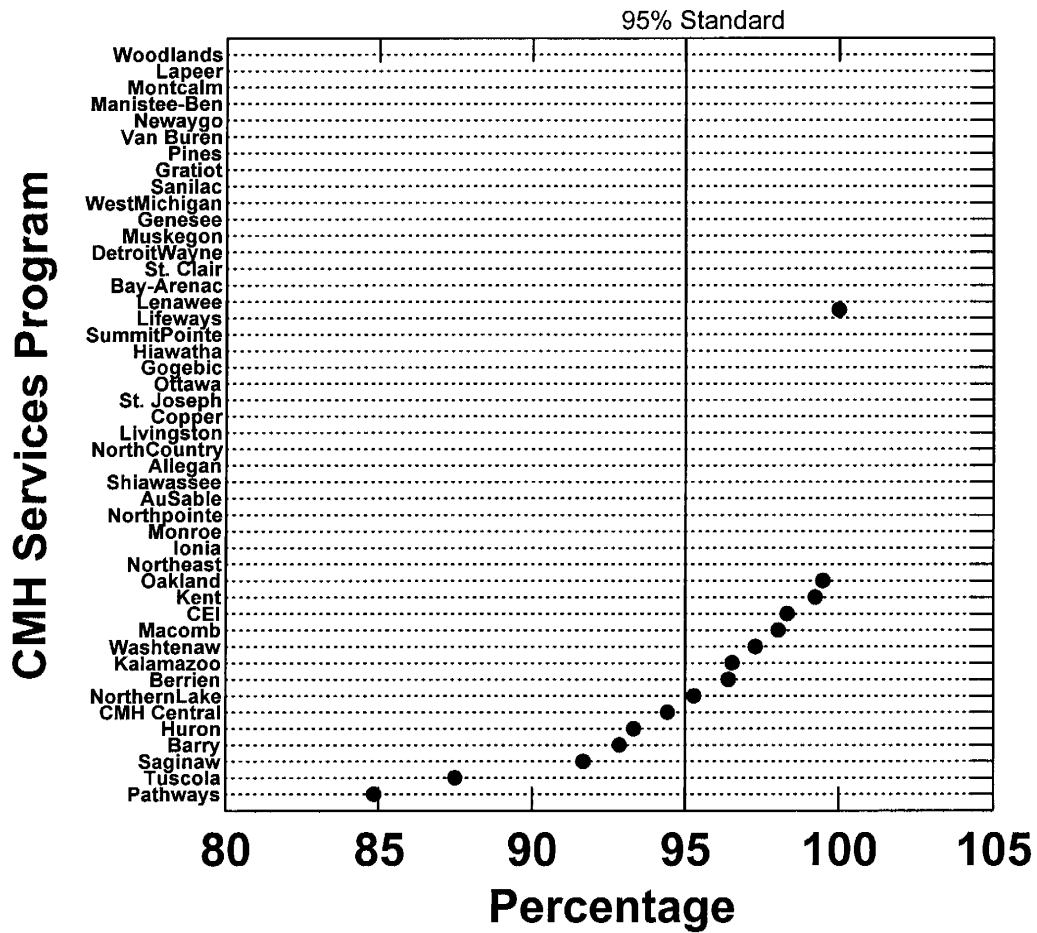
**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, 6 of the 46 CMHSPs did not meet the 95 percent standard. The CMHSPs failing to meet the standard are: CMH Central (94.44%\*), Huron (93.33%\*), Barry (92.86%\*), Saginaw (91.67%), Tuscola (87.5%\*), and Pathways (84.85%). It should be noted that Pathways did not meet the 95 percent standard for any of the quarters during FY05.

Indicator 2d: Percentage of Adults with Developmental Disabilities Who Received a Face-to-Face Meeting with a Professional Within 14 Calendar Days of a Non-Emergent Request for Service

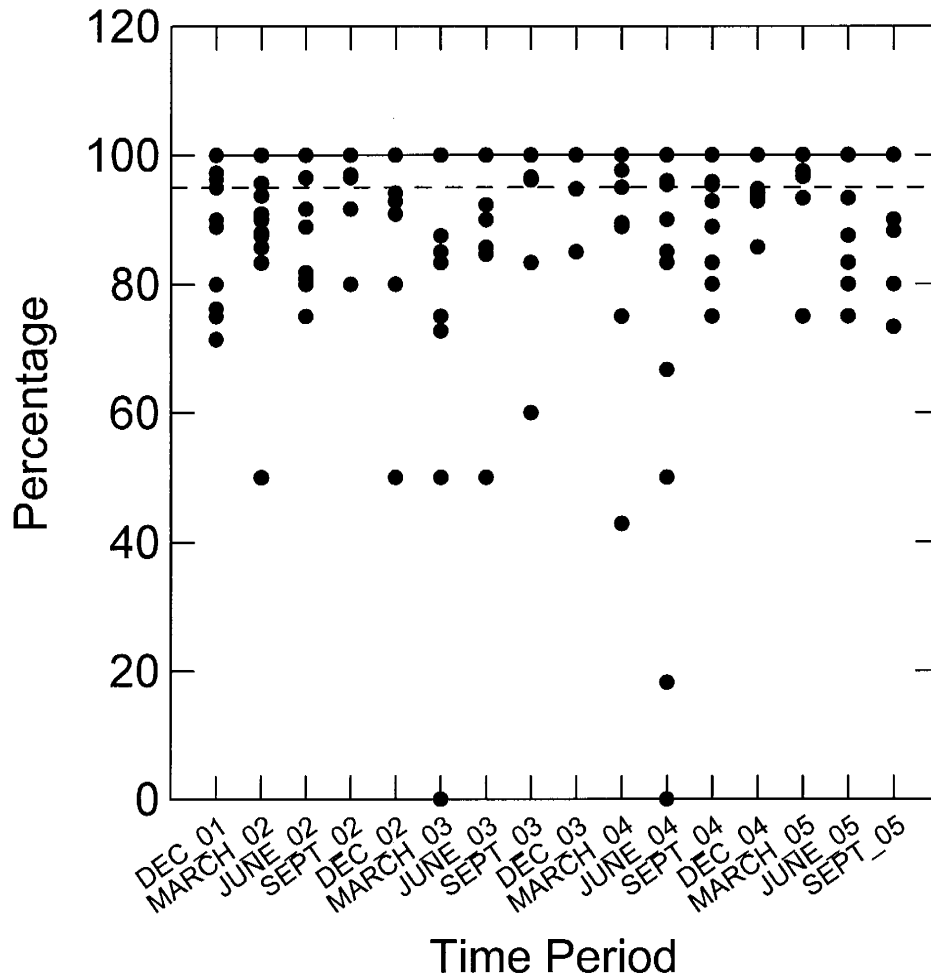
	October - December 2004				January - March 2005				April - June 2005				July - September 2005				Fiscal Year Percentage
	Percentage Q1	# DD Adults Received Assessment Following 1st Request Q1	# DD Adults Received Assessment within 14 Calendar Days Q1	Percentage Q2	# DD Adults Received Assessment Following 1st Request Q2	# DD Adults Received Assessment within 14 Calendar Days Q2	Percentage Q3	# DD Adults Received Assessment Following 1st Request Q3	# DD Adults Received Assessment within 14 Calendar Days Q3	Percentage Q4	# DD Adults Received Assessment Following 1st Request Q4	# DD Adults Received Assessment within 14 Calendar Days Q4					
Allegan	100.00%	5	5	100.00%	2	2	100.00%	5	5	100.00%	4	4	100.00 *				
AuSable	100.00%	6	6	100.00%	5	5	100.00%	2	2	100.00%	4	4	100.00 *				
Barry	100.00%	2	2	100.00%	4	4	100.00%	3	3	80.00%	5	4	92.86 *				
Bay-Arenac	100.00%	6	6	100.00%	9	9	100.00%	8	8	100.00%	3	3	100.00 *				
Berrien	100.00%	1	1	100.00%	4	4	100.00%	13	13	90.00%	10	9	96.43 *				
CEI	94.74%	19	18	96.67%	30	29	100.00%	38	38	100.00%	33	33	98.33 *				
CMH Central MI	-	0	0	100.00%	5	5	87.50%	8	7	100.00%	5	5	94.44 *				
Copper	100.00%	1	1	100.00%	2	2	-	0	0	-	0	0	100.00 *				
Detroit-Wayne	100.00%	15	15	100.00%	13	13	100.00%	8	8	100.00%	20	20	100.00 *				
Genesee	100.00%	11	11	100.00%	17	17	100.00%	30	30	100.00%	32	32	100.00 *				
Gogebic	100.00%	2	2	100.00%	3	3	100.00%	3	3	100.00%	2	2	100.00 *				
Gratiot	100.00%	4	4	100.00%	3	3	100.00%	1	1	100.00%	1	1	100.00 *				
Hiawatha	100.00%	1	1	100.00%	5	5	100.00%	7	7	100.00%	7	7	100.00 *				
Huron	100.00%	5	5	100.00%	5	5	75.00%	4	3	100.00%	1	1	93.33 *				
Ionia	-	0	0	100.00%	3	3	100.00%	1	1	-	0	0	100.00 *				
Kalamazoo	100.00%	15	15	100.00%	17	17	100.00%	9	9	88.24%	17	15	96.55 *				
Kent	100.00%	27	27	96.77%	31	30	100.00%	47	47	100.00%	26	26	99.24 *				
Lapeer	100.00%	1	1	100.00%	7	7	100.00%	2	2	100.00%	2	2	100.00 *				
Lenawee	100.00%	2	2	100.00%	1	1	100.00%	4	4	100.00%	5	5	100.00 *				
Lifeways	100.00%	8	8	100.00%	6	6	100.00%	4	4	100.00%	6	6	100.00 *				
Livingston	100.00%	8	8	100.00%	7	7	100.00%	8	8	100.00%	7	7	100.00 *				
Macomb	94.12%	34	32	100.00%	18	18	100.00%	29	29	100.00%	21	21	98.04 *				
Manistee-Benzie	100.00%	1	1	-	0	0	-	0	0	100.00%	1	1	100.00 *				
Monroe	100.00%	2	2	100.00%	4	4	100.00%	4	4	100.00%	6	6	100.00 *				
Montcalm	100.00%	1	1	-	0	0	100.00%	2	2	100.00%	1	1	100.00 *				
Muskegon	100.00%	17	17	100.00%	19	19	100.00%	9	9	100.00%	10	10	100.00 *				
Newaygo	100.00%	2	2	100.00%	2	2	100.00%	1	1	100.00%	2	2	100.00 *				
Northern Lakes	93.33%	15	14	93.33%	15	14	93.33%	15	14	100.00%	19	19	95.31 *				
Northeast	100.00%	8	8	100.00%	5	5	100.00%	5	5	100.00%	4	4	100.00 *				
North Country	100.00%	2	2	100.00%	2	2	100.00%	4	4	100.00%	3	3	100.00 *				
Northpointe	100.00%	1	1	100.00%	2	2	100.00%	5	5	100.00%	5	5	100.00 *				
Oakland	100.00%	25	25	97.50%	40	39	100.00%	67	67	100.00%	63	63	99.49 *				
Ottawa	100.00%	8	8	100.00%	7	7	100.00%	6	6	100.00%	8	8	100.00 *				
Pathways	85.71%	7	6	75.00%	4	3	83.33%	12	10	90.00%	10	9	84.85 *				
Pines	100.00%	4	4	100.00%	2	2	100.00%	6	6	100.00%	2	2	100.00 *				
Saginaw	100.00%	14	14	100.00%	8	8	100.00%	11	11	73.33%	15	11	91.67 *				
Sanilac	100.00%	3	3	100.00%	2	2	100.00%	3	3	100.00%	5	5	100.00 *				
Shiawassee	100.00%	4	4	100.00%	1	1	100.00%	2	2	100.00%	6	6	100.00 *				
St. Clair	100.00%	12	12	100.00%	13	13	100.00%	13	13	100.00%	17	17	100.00 *				
St. Joseph	-	0	0	-	0	0	100.00%	1	1	-	0	0	100.00 *				
Summit Pointe	100.00%	4	4	100.00%	3	3	100.00%	6	6	100.00%	3	3	100.00 *				
Tuscola	100.00%	1	1	100.00%	1	1	80.00%	5	4	100.00%	1	1	87.50 *				
Van Buren	100.00%	1	1	100.00%	8	8	100.00%	7	7	100.00%	2	2	100.00 *				
Washtenaw	92.86%	14	13	100.00%	12	12	100.00%	4	4	100.00%	7	7	97.30 *				
West Michigan	-	0	0	-	0	0	100.00%	4	4	100.00%	5	5	100.00 *				
Woodlands	100.00%	6	6	100.00%	2	2	100.00%	4	4	100.00%	2	2	100.00 *				
	98.15%	325	319	98.57%	349	344	98.60%	430	424	97.79%	408	399					

\*Percentage based on fewer than 20 consumers.

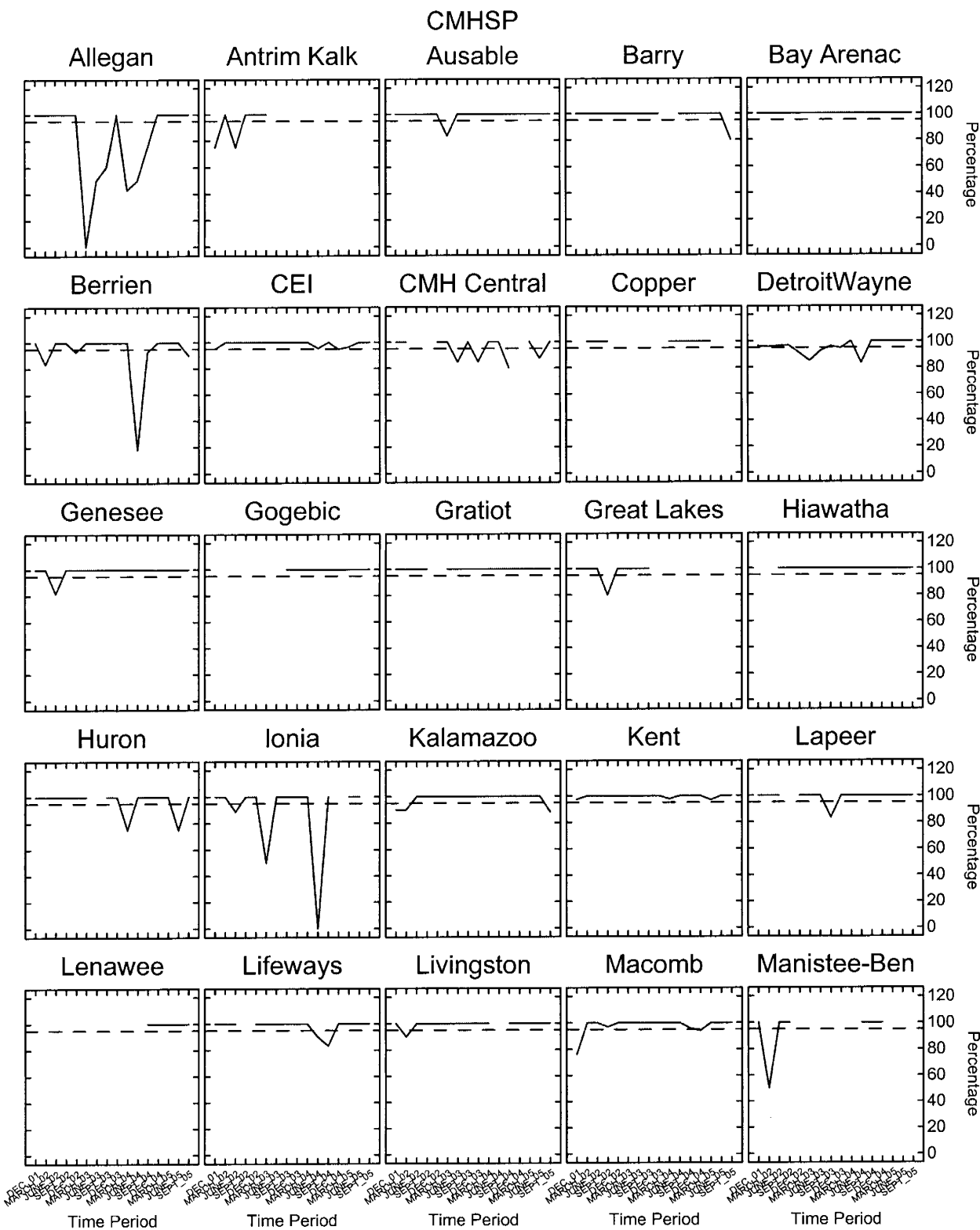
# Percentage of DD Adults Who Received a Face-to-Face Meeting with a Professional Within 14 Calendar Days of a Non-Emergent Request for Service



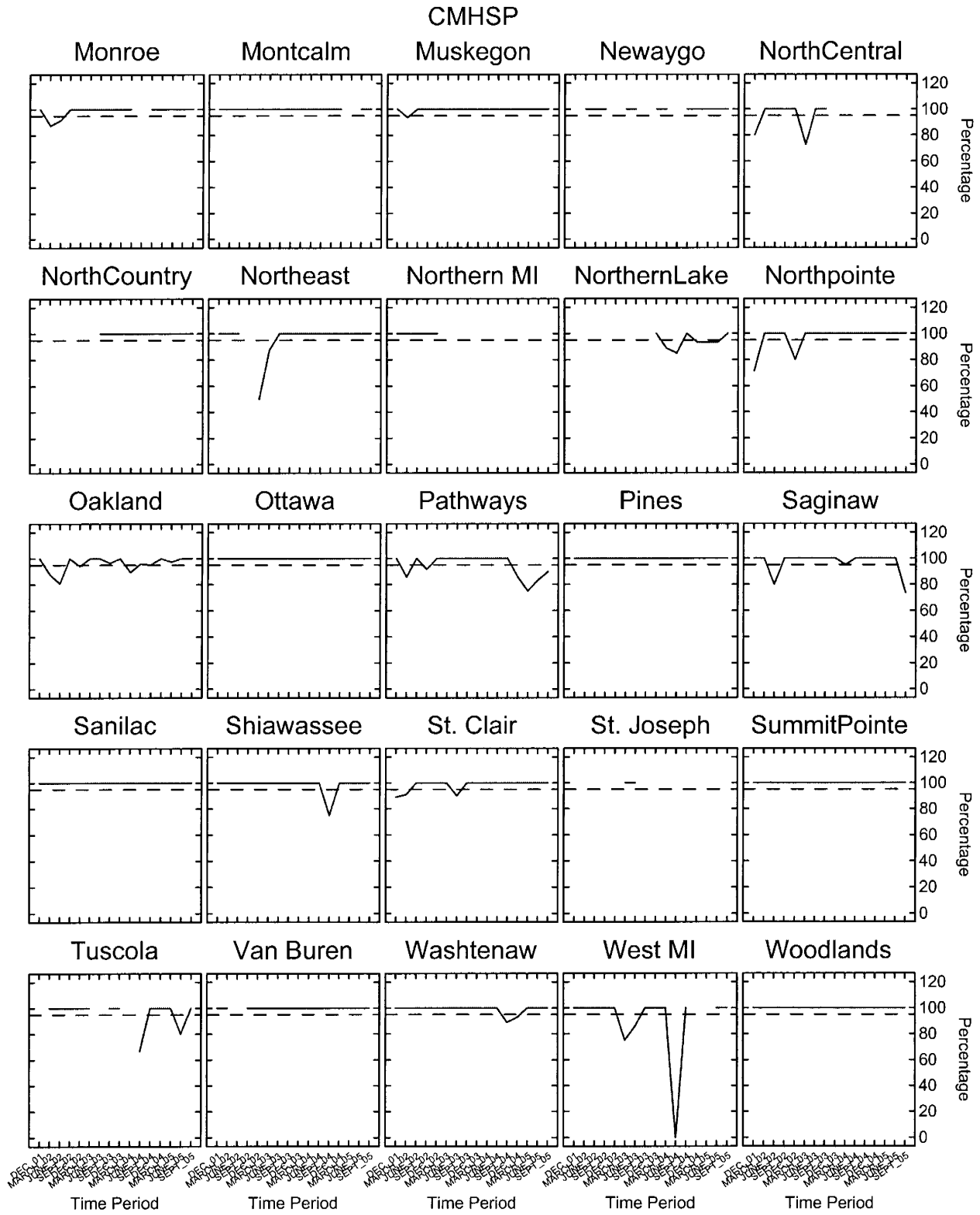
## Scatterplot 2d: Meeting with a Professional (Adults with Developmental Disabilities)



# Indicator No. 2d - Meeting with a Professional (Adults with Developmental Disabilities)



# Indicator No. 2d - Page Two





*Indicator 3. Access: Timeliness – Percentage of persons starting any needed on-going service within 14 days of a non-emergent assessment with a professional. The standard is 95 percent within 14 days.*

**Rationale for Use:** The amount of time between professional assessment and the delivery of needed treatments and supports addresses a somewhat different aspect of access to care than Indicator 2. Delay in the delivery of needed services and supports may lead to exacerbation of symptoms and distress and poorer role functioning.

**Definitions:**

- **Assessment** means face-to-face assessment with a professional that results in a decision whether to provide ongoing CMHSP service.
- **Days** are calendar days.
- **Non-emergent assessment** and services **exclude** pre-admission screening for and receipt of psychiatric in-patient care.
- **Ongoing service** means any recommended CMHSP service, including case management, respite care, etc. For purposes of this data collection, the assessment session shall not be considered the start of ongoing service. However, another service delivered by a different person (e.g., psychiatric service) on the same day may be considered ongoing service.

**Method of Calculation:**

- **Numerator:** The number of persons starting any needed on-going service within 14 days of a non-emergent face-to-face assessment with a professional.
- **Denominator:** Consumers for which the start of non-emergent on-going service took place during the time period. Consumers who request ongoing services outside the 14-day period or do not show for an appointment may be excluded from the count.

**Note:** If more than a single assessment is performed, the time calculation should be based on the first.

**Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	46	46	46	46
Minimum	66.670	77.200	78.900	59.150
Maximum	100.000	100.000	100.000	100.000
Median	96.325	95.285	95.810	97.050
Mean	93.048	93.262	94.527	94.315

**Comments:**

**Historical trends:** This indicator has been in place since FY '02. The trend line (lowess smooth line) of the longitudinal scatter plot shows a trend beginning slightly below the 95 percent standard and increasing slightly above the standard. The scatterplot also shows a decrease in the variation or spread among the CMHSPs since FY '02.

*Indicator 3 continued:*

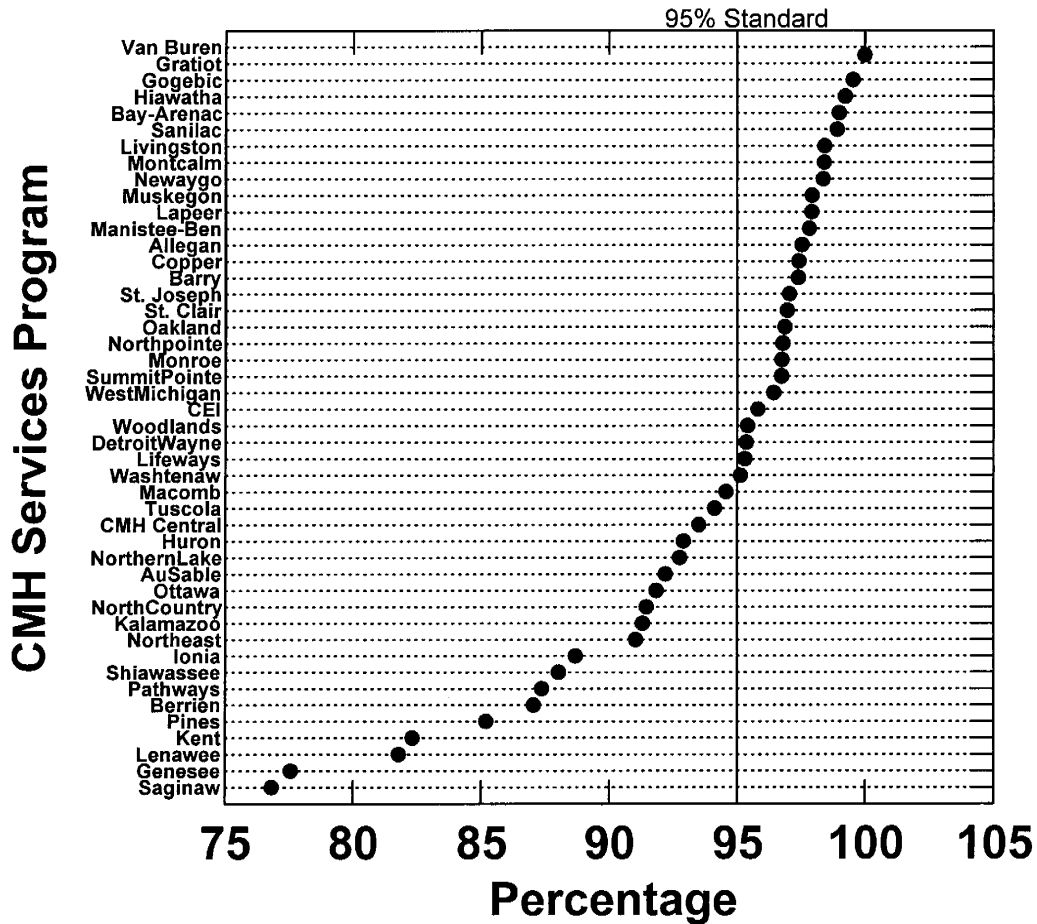
**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, 19 of the 46 CMHSPs did not meet the 95 percent standard. The CMHSPs failing to meet the standard are: Macomb (94.56%), Tuscola (94.12%), CMH Central (93.5%), Huron (92.9%), Northern Lakes (92.75%), AuSable (92.19%), Ottawa (91.83%), North Country (91.45%), Kalamazoo (91.3%), Northeast (91.03%), Ionia (88.69%), Shiawassee (88.03%), Pathways (87.37%), Berrien (87.05%), Pines (85.19%), Kent (82.32%), Lenawee (81.78%), Genesee (77.56%), and Saginaw (76.82%).

It should be noted that Genesee, Kalamazoo, Kent, Northern Lakes, Pathways, Saginaw, did not meet the 95 percent standard for any quarter during FY '05.

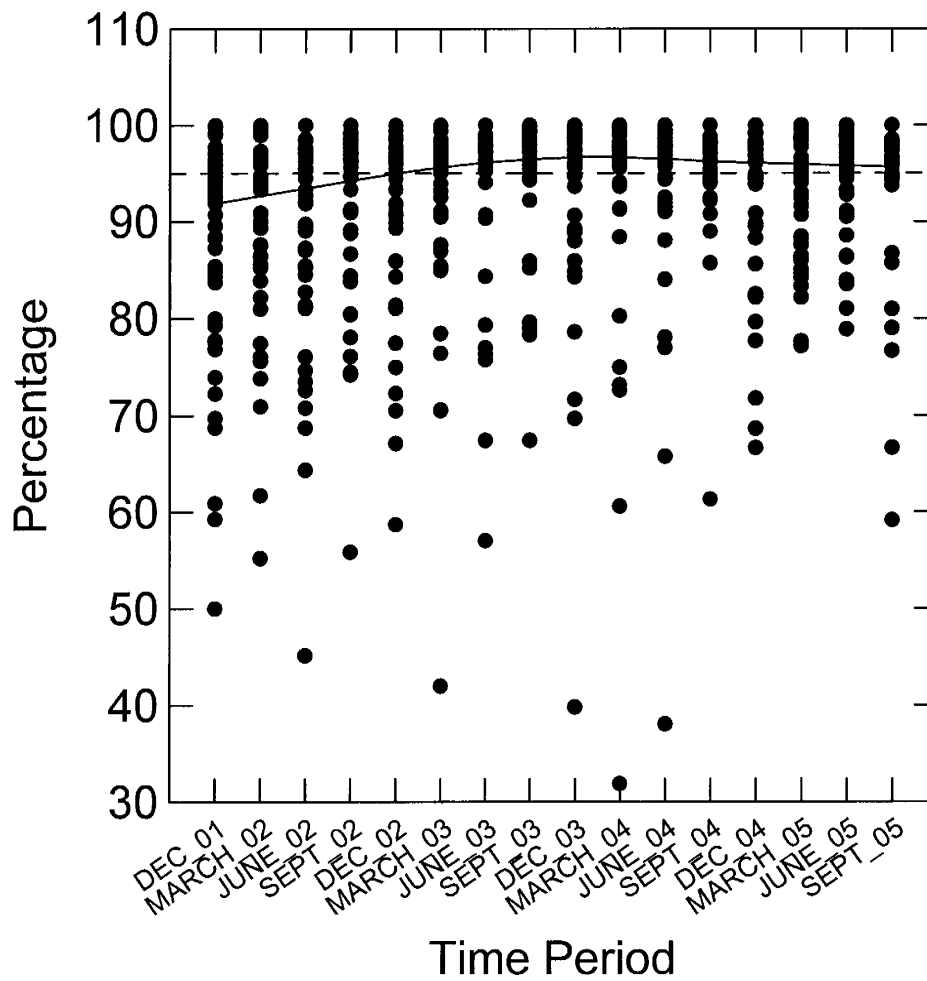
Indicator 3: Percentage of Persons Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment With a Professional

	October - December 2004			January - March 2005			April - June 2005			July - September 2005			Fiscal Year Percentage
	Percentage Q1	Total Starting Ongoing Service Q1	Total Starting Ongoing Service within 14 Calendar Days Q1	Percentage Q2	Total Starting Ongoing Service Q2	Total Starting Ongoing Service within 14 Calendar Days Q2	Percentage Q3	Total Starting Ongoing Service Q3	Total Starting Ongoing Service within 14 Calendar Days Q3	Percentage Q4	Total Starting Ongoing Service Q4	Total Starting Ongoing Service within 14 Calendar Days Q4	
Allegan	93.85%	130	122	98.77%	81	80	99.04%	104	103	100.00%	92	92	97.54
AuSable	94.37%	142	134	87.60%	129	113	88.57%	140	124	96.63%	178	172	92.19
Barry	99.07%	108	107	97.79%	136	133	95.88%	97	93	96.69%	121	117	97.40
Bay-Arenac	99.26%	269	267	99.58%	237	236	98.92%	186	184	98.10%	211	207	99.00
Berrien	82.50%	160	132	83.33%	180	150	83.94%	218	183	96.40%	222	214	87.05
CEI	96.26%	187	180	96.62%	266	257	92.78%	263	244	97.89%	237	232	95.80
CMH Central MI	94.25%	557	525	85.97%	449	386	95.09%	387	368	97.69%	562	549	93.50
Copper	98.18%	55	54	98.59%	71	70	95.45%	66	63	97.56%	41	40	97.42
Detroit-Wayne	97.56%	821	801	94.29%	911	859	95.27%	972	926	94.68%	1,127	1,067	95.35
Genesee	77.72%	359	279	77.20%	465	359	78.90%	474	374	76.69%	605	464	77.56
Gogebic	100.00%	64	64	100.00%	79	79	97.87%	47	46	100.00%	28	28	99.54
Gratiot	100.00%	46	46	100.00%	39	39	100.00%	34	34	100.00%	38	38	100.00
Hiawatha	98.25%	114	112	100.00%	97	97	98.90%	91	90	100.00%	95	95	99.24
Huron	97.87%	47	46	88.37%	43	38	90.74%	54	49	94.87%	39	37	92.90
Ionia	66.67%	81	54	96.55%	58	56	100.00%	72	72	95.83%	72	69	88.69
Kalamazoo	94.59%	111	105	94.29%	105	99	91.09%	101	92	86.71%	143	124	91.30
Kenil	79.65%	752	599	82.16%	813	668	86.31%	796	687	80.98%	773	626	82.32
Lapeer	100.00%	42	42	90.70%	43	39	100.00%	49	49	100.00%	58	58	97.92
Lenawee	96.59%	88	85	88.46%	52	46	81.03%	58	47	59.15%	71	42	81.78
Lifeways	94.92%	177	168	94.90%	157	149	96.55%	174	168	94.57%	129	122	95.29
Livingston	100.00%	59	59	100.00%	36	36	95.74%	47	45	97.96%	49	48	98.43
Macomb	90.84%	371	337	96.03%	403	387	94.74%	513	486	95.92%	515	494	94.56
Manistee-Benzie	96.23%	53	51	98.51%	67	66	98.00%	50	49	100.00%	14	14	97.83
Monroe	97.62%	84	82	92.96%	71	66	98.68%	76	75	97.40%	77	75	96.75
Montcalm	100.00%	71	71	100.00%	123	123	93.33%	105	98	100.00%	141	141	98.41
Muskegon	96.07%	229	220	98.84%	258	255	98.73%	237	234	97.92%	240	235	97.93
Newaygo	98.35%	121	119	100.00%	94	94	97.12%	104	101	98.18%	110	108	98.37
Northern Lakes	93.98%	349	328	91.62%	334	306	90.51%	274	248	94.92%	256	243	92.75
Northeast	89.47%	76	68	84.62%	91	77	94.44%	72	68	98.39%	62	61	91.03
North Country	85.59%	222	190	86.30%	270	233	97.55%	204	199	97.81%	228	223	91.45
Northpointe	96.39%	83	80	94.95%	99	94	95.70%	93	89	100.00%	99	99	96.79
Oakland	96.89%	483	468	96.59%	615	594	97.62%	630	615	96.44%	703	678	96.87
Ottawa	97.93%	145	142	85.03%	187	159	86.42%	81	70	97.33%	150	146	91.83
Pathways	88.29%	111	98	88.33%	120	106	86.32%	95	82	85.71%	70	60	87.37
Pines	68.66%	134	92	84.21%	95	80	97.06%	102	99	93.75%	128	120	85.19
Saginaw	82.20%	118	97	77.68%	112	87	83.52%	91	76	66.67%	132	88	76.82
Sanilac	96.92%	65	63	98.51%	67	66	100.00%	79	79	100.00%	67	67	98.92
Shiawassee	71.77%	124	89	92.47%	93	86	98.25%	114	112	94.29%	70	66	88.03
St. Clair	94.71%	170	161	98.80%	166	164	99.33%	149	148	95.00%	140	133	96.96
St. Joseph	89.80%	49	44	98.47%	131	129	97.94%	97	95	100.00%	28	28	97.05
Summit Pointe	96.94%	98	95	96.27%	134	129	98.28%	116	114	95.77%	142	136	96.73
Tuscola	97.33%	75	73	98.57%	70	69	98.78%	82	81	79.03%	62	49	94.12
Van Buren	100.00%	120	120	100.00%	192	192	100.00%	142	142	100.00%	128	128	100.00
Washtenaw	98.39%	186	183	86.42%	81	70	95.05%	101	96	96.77%	62	60	95.12
West Michigan	96.18%	131	126	95.62%	137	131	95.54%	157	150	98.52%	135	133	96.43
Woodlands	98.08%	104	102	94.07%	118	111	93.26%	89	83	96.25%	80	77	95.40
Total	91.88%	8,141	7,480	91.70%	8,575	7,863	93.32%	8,283	7,730	92.82%	8,730	8,103	

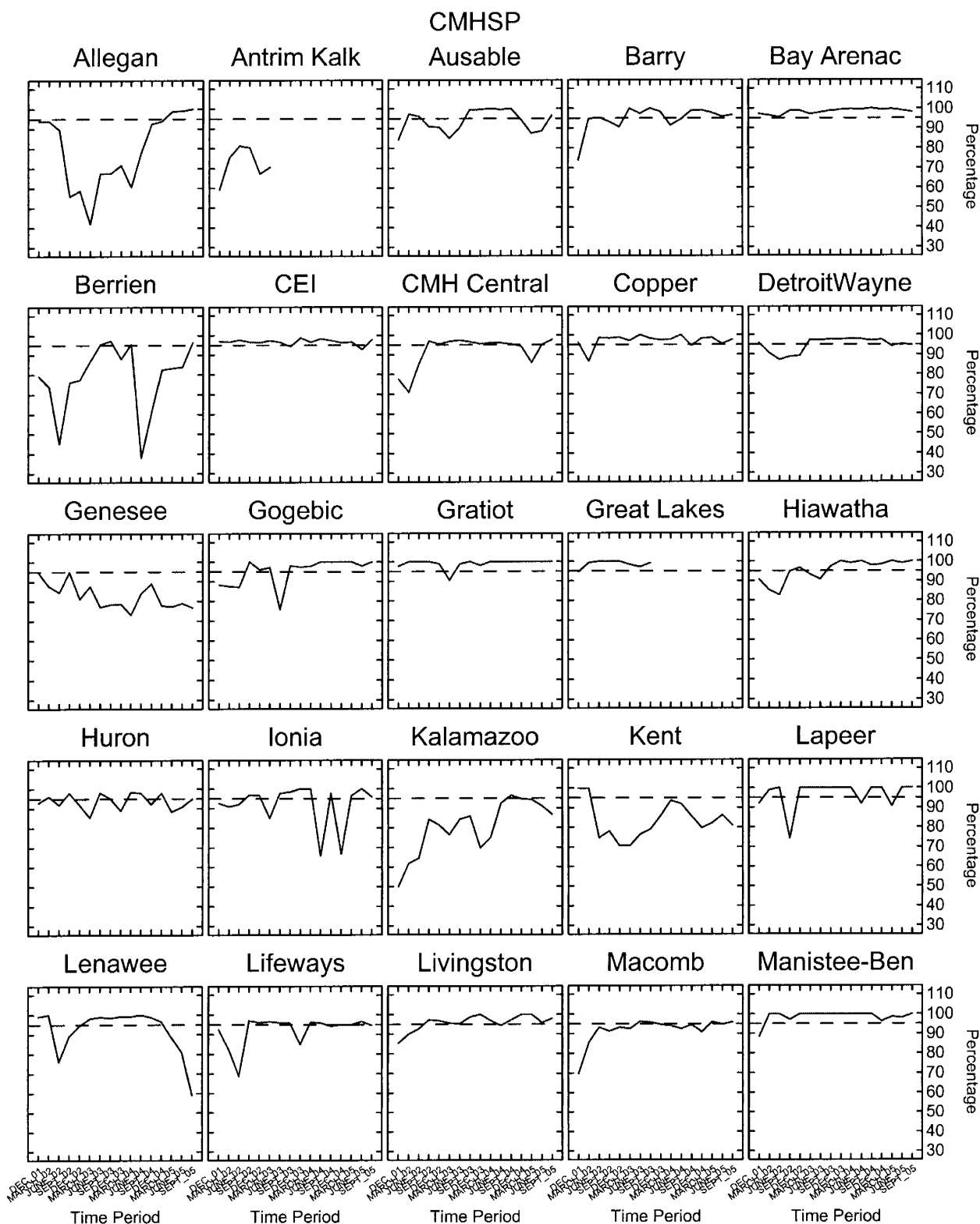
# Percentage of Persons Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment with a Professional



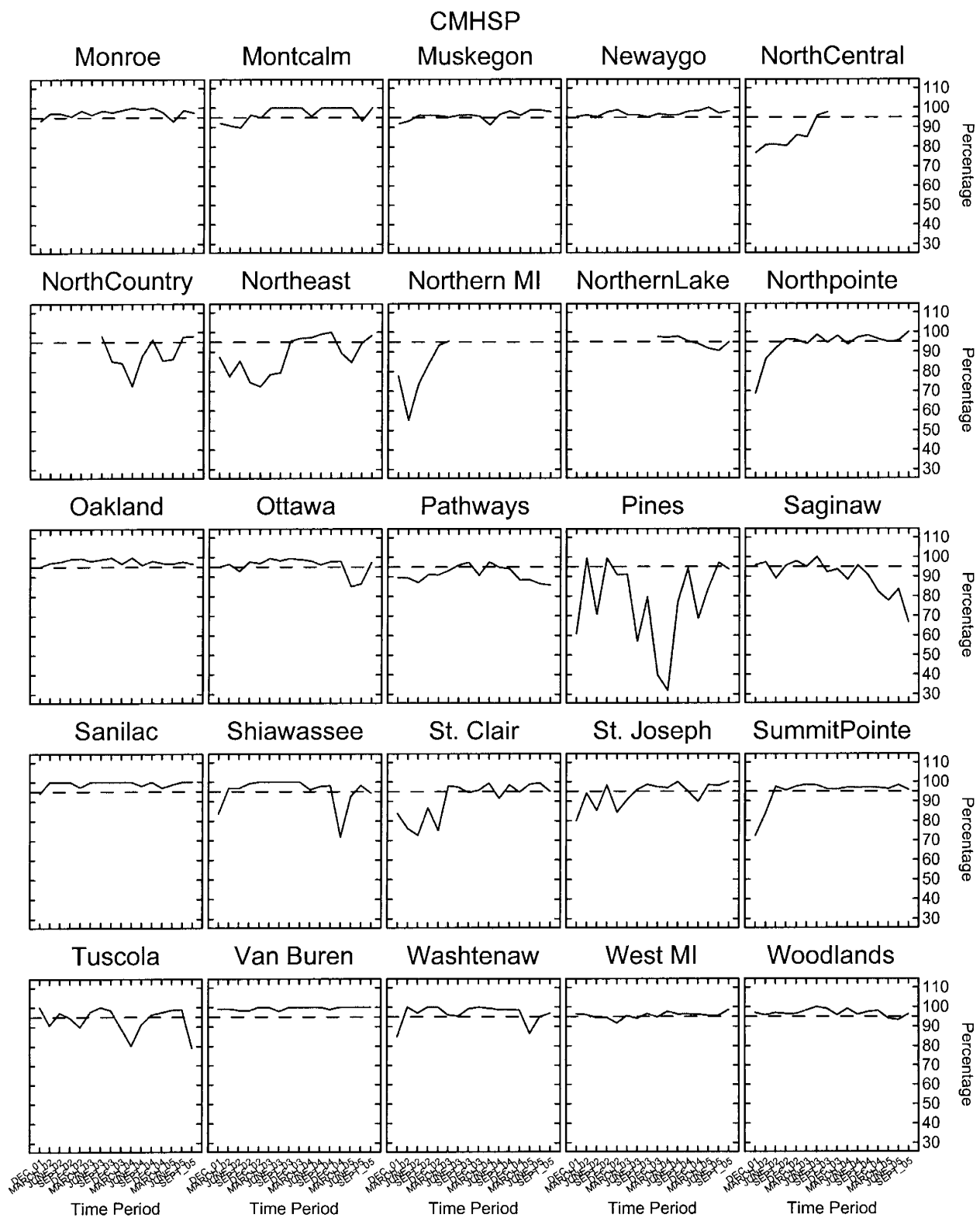
Scatterplot 3: % Starting On-going Svs. Within 14 Days



# Indicator No.3- % Starting On-going Svs. Within 14 Days



## Indicator No. 3 - Page Two



*Indicator 3a. Access: Timeliness – Percentage of children with emotional disturbances starting any needed on-going service within 14 days of a non-emergent assessment with a professional. The standard is 95 percent within 14 days.*

#### **Rationale for Use:**

The amount of time between professional assessment and the delivery of needed treatments and supports addresses a somewhat different aspect of access to care than Indicator 2. Delay in the delivery of needed services and supports may lead to exacerbation of symptoms and distress and poorer role functioning.

#### **Definitions:**

- **Assessment** means face-to-face assessment with a professional that results in a decision whether to provide ongoing CMHSP service.
- **Days** are calendar days.
- **Non-emergent assessment** and services **exclude** pre-admission screening for and receipt of psychiatric in-patient care.
- **Ongoing service** means any recommended CMHSP service, including case management, respite care, etc. For purposes of this data collection, the assessment session shall not be considered the start of ongoing service. However, another service delivered by a different person (e.g., psychiatric service) on the same day may be considered ongoing service.

#### **Method of Calculation:**

- **Numerator:** The number of children with an emotional disturbance starting any needed on-going service within 14 days of a non-emergent face-to-face assessment with a professional.
- **Denominator:** The number of children with an emotional disturbance for which the start of non-emergent on-going service took place during the time period. Consumers who request ongoing services outside the 14-day period or do not show for an appointment may be excluded from the count.

**Note:** If more than a single assessment is performed, the time calculation should be based on the first.

#### **Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	46	46	46	46
Minimum	58.540	59.180	66.670	44.830
Maximum	100.000	100.000	100.000	100.000
Median	95.445	93.215	96.015	99.625
Mean	92.022	90.317	93.355	92.118

#### **Comments:**

**Historical trends:** This indicator has been in place since FY '02. The trend line (lowess smooth line) of the longitudinal scatter plot shows a trend beginning slightly below the 95 percent standard and increasing slightly above the standard. The scatterplot also shows a decrease in the variation or spread among the CMHSPs since FY '02.



*Indicator 3a continued:*

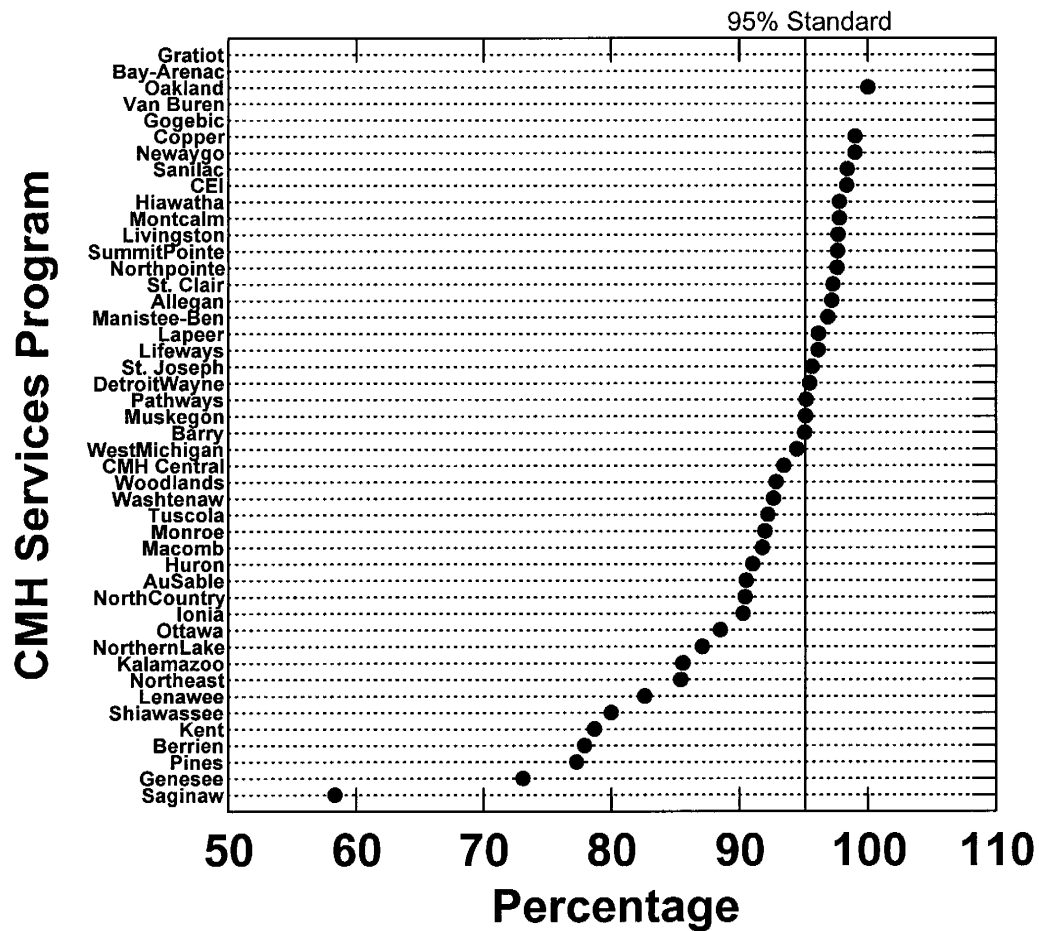
**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, 21 of the 46 CMHSPs did not meet the 95 percent standard. The CMHSPs failing to meet the standard are: West Michigan (94.48%), CMH Central (93.47%), Woodlands (92.86%), Washtenaw (92.66%), Tuscola (92.23%), Monroe (92%), Huron (91.04%), AuSable (90.53%), North Country (90.45%), Ionia (90.28%), Ottawa (88.5%), Northern Lakes (87.09%), Kalamazoo (85.58%), Northeast (85.42%), Lenawee (82.61%), Shiawassee (80%), Kent (78.7%), Berrien (77.92%), Pines (77.3%), Genesee (73.09%), and Saginaw (58.33%).

It should be noted that Genesee, Kalamazoo, Kent, Northern Lakes, Pines and Saginaw did not meet the 95 percent standard during any quarter of FY '05.

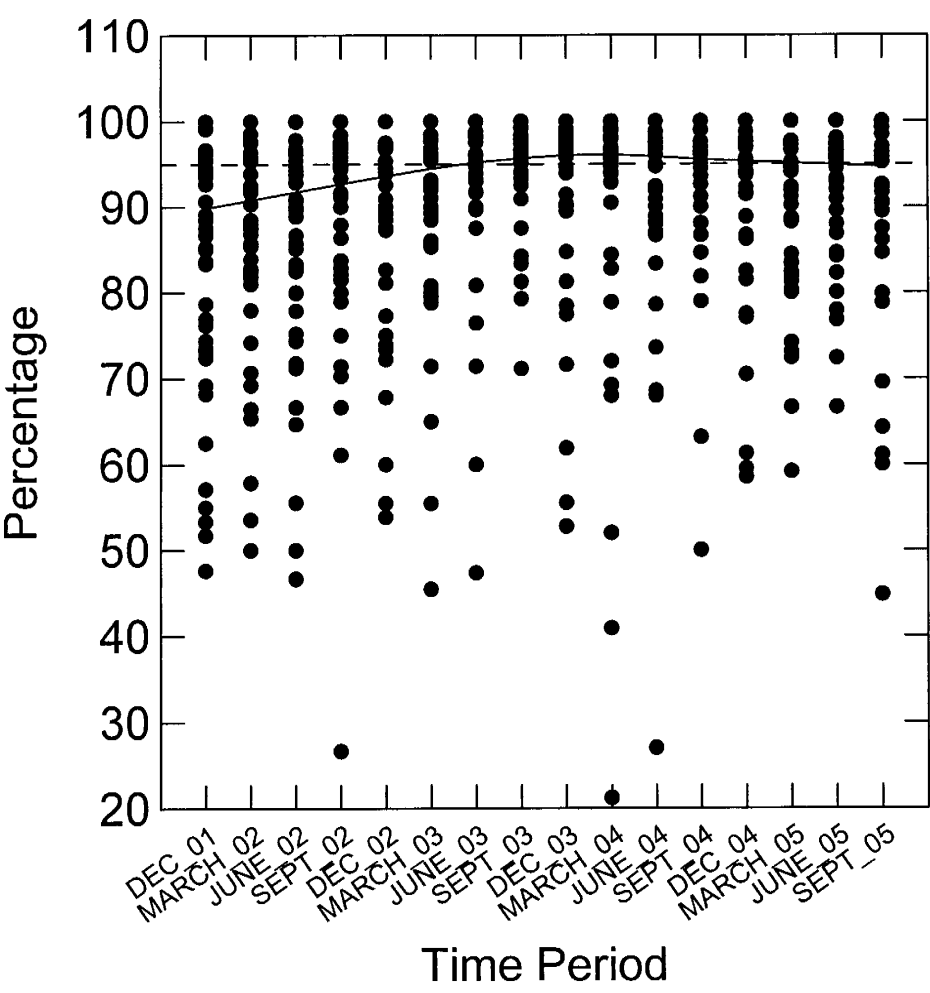
Indicator 3a: Percentage of Children with Emotional Disturbances Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment With a Professional

	October - December 2004				January - March 2005				April - June 2005				July - September 2005				Fiscal Year Percentage
	# MI Children Starting Ongoing Service Q1	# MI Children Starting Ongoing Service Q1	Percentage Q2	# MI Children Starting Ongoing Service Q2	# MI Children Starting Ongoing Service Q2	Percentage Q3	# MI Children Starting Ongoing Service Q3	# MI Children Starting Ongoing Service Q3	Percentage Q4	# MI Children Starting Ongoing Service Q4	# MI Children Starting Ongoing Service Q4						
Alligan	91.67%	36	33	100.00%	24	24	100.00%	21	21	100.00%	25	25	97.17				
Ausable	92.31%	39	36	91.89%	37	34	82.22%	45	37	95.83%	48	46	90.53				
Barry	100.00%	31	31	94.59%	37	35	95.65%	23	23	90.32%	31	28	95.08				
Bay-Arenac	100.00%	95	95	100.00%	69	69	100.00%	48	48	100.00%	68	68	100.00				
Berrien	70.45%	44	29	72.41%	29	21	76.79%	56	43	100.00%	25	25	77.92				
CEI	97.95%	98	96	97.67%	172	166	98.03%	152	149	100.00%	120	120	98.34				
CMH Central MI	94.92%	177	168	83.46%	133	111	95.93%	123	118	99.25%	134	133	93.47				
Copper	96.97%	33	32	100.00%	36	36	100.00%	24	24	100.00%	8	8	99.01				
Detroit-Wayne	98.79%	331	327	91.19%	386	352	97.15%	386	375	95.24%	399	380	95.47				
Genesee	77.50%	80	62	74.16%	89	66	72.38%	105	76	69.52%	105	73	73.09				
Geogebic	100.00%	24	24	100.00%	33	33	100.00%	15	15	100.00%	10	10	100.00				
Graftiot	100.00%	17	17	100.00%	15	15	100.00%	11	11	100.00%	22	22	100.00				
Hiawatha	95.65%	46	44	100.00%	37	37	96.67%	30	29	100.00%	23	23	97.79				
Huron	94.12%	17	16	81.25%	16	13	95.45%	22	21	91.67%	12	11	91.04				
Ionia	86.21%	29	25	94.12%	17	16	100.00%	7	7	89.47%	19	17	90.28				
Kalamazoo	91.67%	24	22	81.82%	22	18	92.00%	25	23	78.79%	33	26	85.58				
Kent	77.07%	205	158	80.31%	193	155	77.89%	199	155	79.87%	154	123	78.70				
Lapeer	100.00%	6	6	83.33%	6	5	100.00%	7	7	100.00%	7	7	96.15				
Lapeer	100.00%	16	16	66.67%	3	2	84.62%	13	11	64.29%	14	9	82.61				
Lenawee	93.94%	33	31	100.00%	23	23	93.10%	29	27	100.00%	18	18	96.12				
Lifeways	100.00%	14	14	100.00%	6	6	100.00%	10	10	92.31%	13	12	97.67				
Livingston	94.25%	87	82	92.31%	91	84	89.54%	153	137	92.59%	108	100	91.80				
Macomb	95.24%	21	20	100.00%	23	23	93.33%	15	14	100.00%	5	5	96.88				
Manistee-Benzie	100.00%	15	15	88.24%	17	15	100.00%	13	13	60.00%	5	3	82.00				
Montcalm	100.00%	22	22	100.00%	53	53	88.00%	25	22	100.00%	35	35	97.78				
Muskegon	93.75%	48	45	95.24%	63	60	95.00%	40	38	96.36%	55	53	95.15				
Newaygo	96.88%	32	31	100.00%	24	24	100.00%	21	21	100.00%	23	23	99.00				
Northern Lakes	88.81%	134	119	83.45%	139	116	86.87%	99	86	90.59%	85	77	87.09				
Northeast	81.48%	27	22	82.35%	34	28	84.21%	19	16	100.00%	16	16	85.42				
North Country	82.47%	97	80	88.66%	97	86	96.10%	77	74	98.44%	64	63	90.45				
Northpointe	100.00%	22	22	95.24%	21	20	95.65%	23	22	100.00%	17	17	97.59				
Oakland	100.00%	88	88	100.00%	105	105	100.00%	65	65	100.00%	71	71	100.00				
Ottawa	100.00%	29	29	84.44%	45	38	80.00%	15	12	87.50%	24	21	88.50				
Pathways	97.62%	42	41	92.31%	39	36	92.86%	28	26	100.00%	16	16	95.20				
Pines	58.54%	41	24	73.08%	26	19	92.11%	38	35	86.11%	36	31	77.30				
Saginaw	59.52%	42	25	59.18%	49	29	66.67%	36	24	44.83%	58	13	58.33				
Sanilac	93.75%	16	15	100.00%	24	24	100.00%	19	19	100.00%	3	3	98.39				
Shawassee	61.29%	31	19	80.00%	30	24	96.77%	31	30	84.62%	13	11	80.00				
St. Clair	91.43%	35	32	96.67%	30	29	100.00%	43	43	100.00%	38	38	97.26				
St. Joseph	86.67%	15	13	94.74%	38	36	100.00%	28	28	100.00%	11	11	95.65				
Summit Pointe	100.00%	29	29	97.22%	36	35	96.43%	28	27	97.06%	34	33	97.64				
Tuscola	97.06%	34	33	100.00%	24	24	100.00%	27	27	61.11%	34	33	92.23				
Van Buren	100.00%	37	37	100.00%	48	48	100.00%	30	30	100.00%	24	24	100.00				
Washtenaw	100.00%	46	46	80.00%	50	40	94.55%	55	52	100.00%	26	26	92.66				
West Michigan	95.00%	40	38	86.37%	43	38	97.44%	39	38	100.00%	23	23	94.48				
Woodlands	100.00%	32	32	90.20%	51	46	90.91%	33	30	91.67%	24	22	92.86				
	91.29%	2,457	2,243	89.78%	2,583	2,319	91.79%	2,351	2,158	92.30%	2,091	1,930					

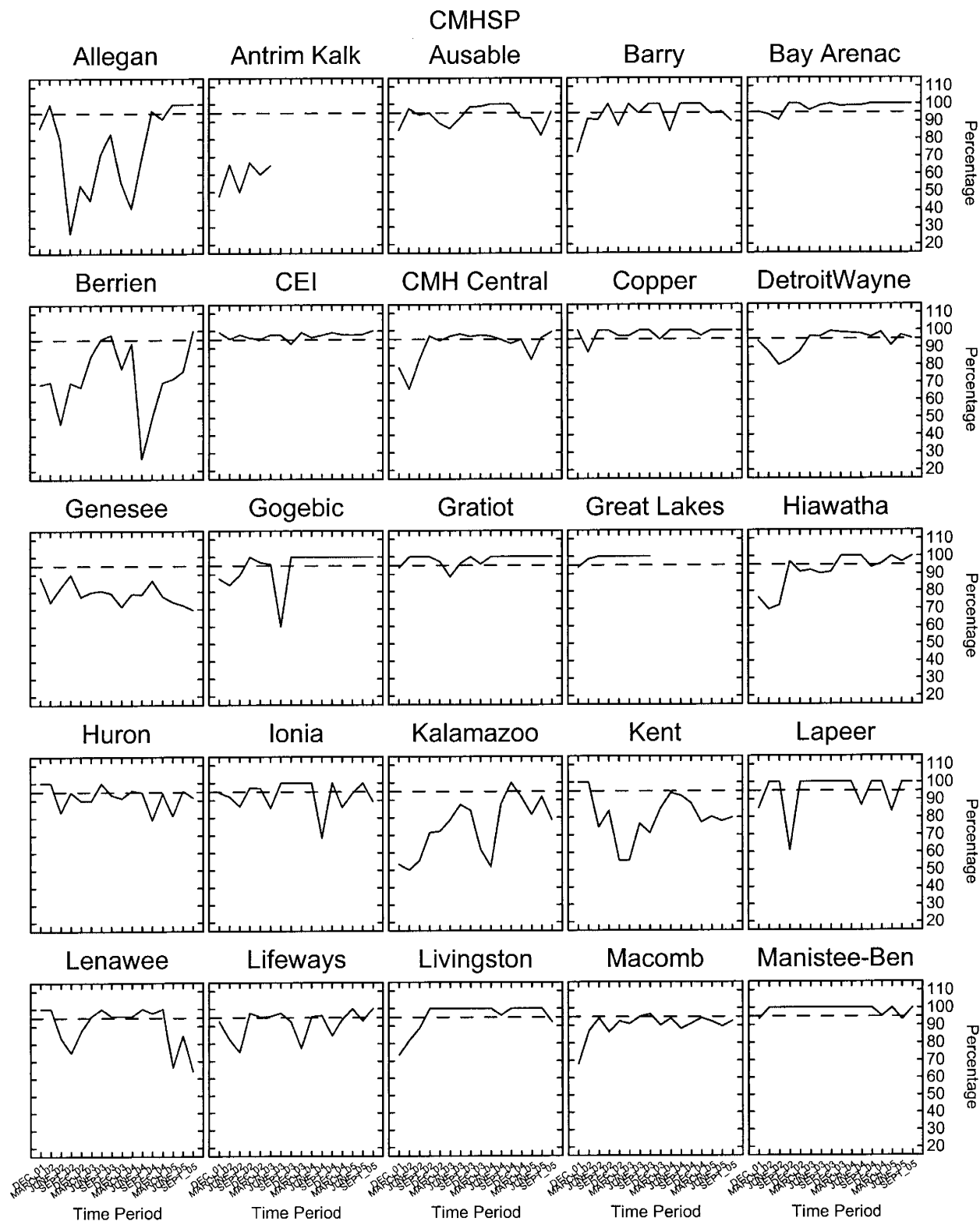
# Percentage of Children with Emotional Disturbances Starting any Needed On-going Service Within 14 Days of a Non- Emergent Assessment with a Professional



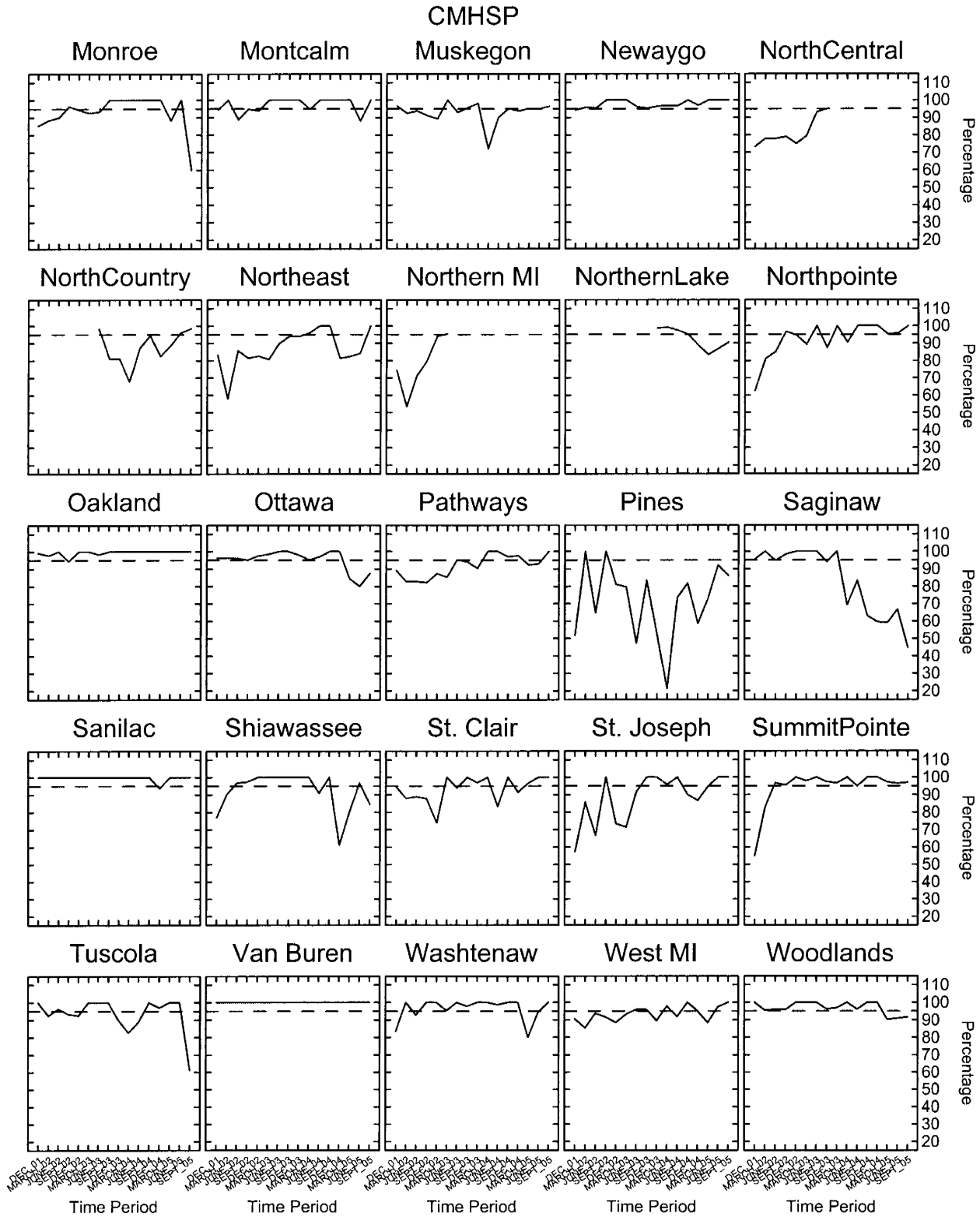
Scatterplot 3a: % Starting On-going Svs. Within 14 Days  
(Children with Emotional Disturbances)



# Indicator No.3a- % Starting On-going Svs. Within 14 Days (Children with Emotional Disturbance)



# Indicator No. 3a - Page Two



*Indicator 3b. Access: Timeliness – Percentage of adults with mental illness starting any needed on-going service within 14 days of a non-emergent assessment with a professional. The standard is 95 percent within 14 days.*

#### **Rationale for Use:**

The amount of time between professional assessment and the delivery of needed treatments and supports addresses a somewhat different aspect of access to care than Indicator 2. Delay in the delivery of needed services and supports may lead to exacerbation of symptoms and distress and poorer role functioning.

#### **Definitions:**

- **Assessment** means face-to-face assessment with a professional that results in a decision whether to provide ongoing CMHSP service.
- **Days** are calendar days.
- **Non-emergent assessment** and services **exclude** pre-admission screening for and receipt of psychiatric in-patient care.
- **Ongoing service** means any recommended CMHSP service, including case management, respite care, etc. For purposes of this data collection, the assessment session shall not be considered the start of ongoing service. However, another service delivered by a different person (e.g., psychiatric service) on the same day may be considered ongoing service.

#### **Method of Calculation:**

- **Numerator:** The number of adults with mental illness starting any needed on-going service within 14 days of a non-emergent face-to-face assessment with a professional.
- **Denominator:** The number of adults with mental illness for which the start of non-emergent on-going service took place during the time period. Consumers who request ongoing services outside the 14-day period or do not show for an appointment may be excluded from the count.

**Note:** If more than a single assessment is performed, the time calculation should be based on the first.

#### **Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	46	46	46	46
Minimum	54.900	78.960	80.000	55.770
Maximum	100.000	100.000	100.000	100.000
Median	96.390	97.085	96.740	97.545
Mean	93.739	94.863	95.343	94.791

#### **Comments:**

**Historical trends:** This indicator has been in place since FY '02. The trend line (lowess smooth line) of the longitudinal scatter plot shows a trend beginning slightly below the 95 percent standard and increasing slightly above the standard. The scatterplot also shows a decrease in the variation or spread among the CMHSPs since FY '02.

*Indicator 3b continued:*

**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, 15 of the 46 CMHSPs did not meet the 95 percent standard. The CMHSPs failing to meet the standard are: Kalamazoo (93.85%), CMH Central (93.72%), Northeast (93.44%), Ottawa (92.97%), AuSable (92.56%), North Country (91.74%), Shiawassee (91.52%), Berrien (89.32%), Pines (88.49%), Ionia (87.44%), Saginaw (87.34%), Pathways (84.02%), Kent (83.01%), Lenawee (81.64%), and Genesee (79.62%).

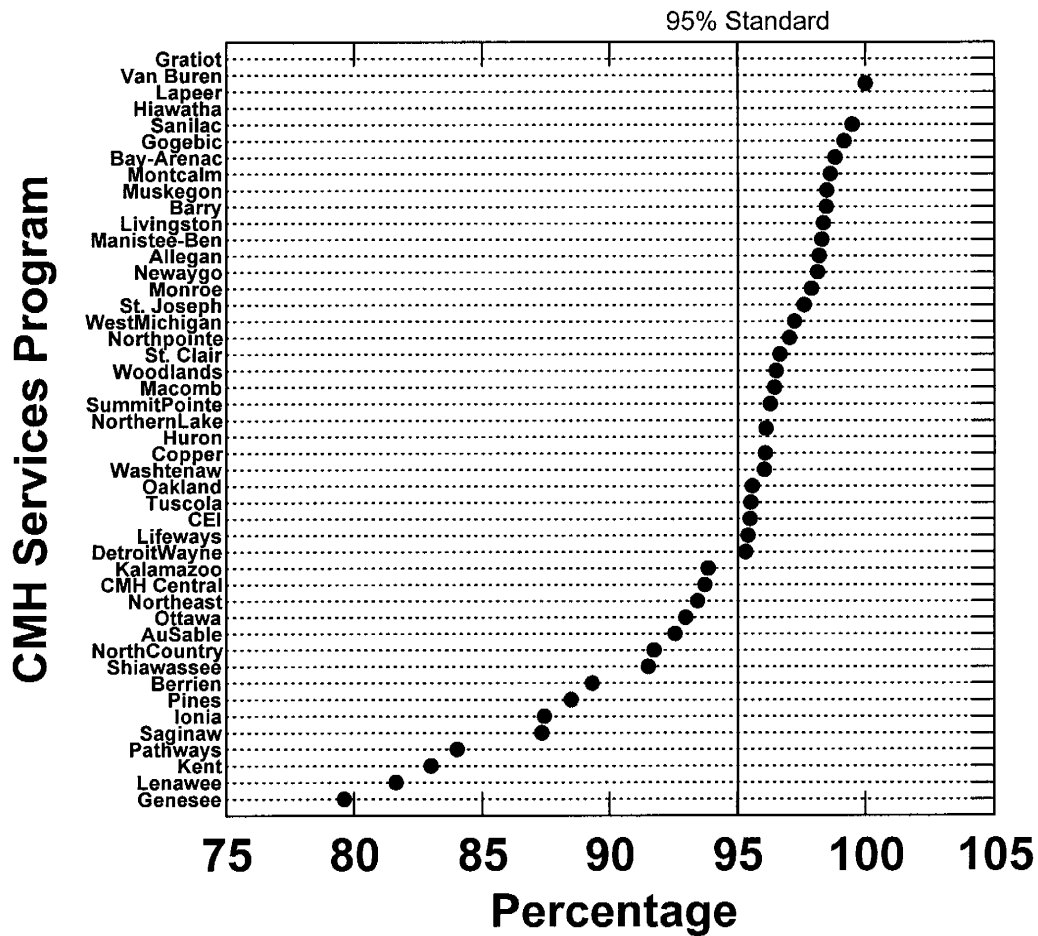
It should be noted that Genesee, Kent, and Pathways, did not meet the 95 percent standard during any quarter of FY '05.



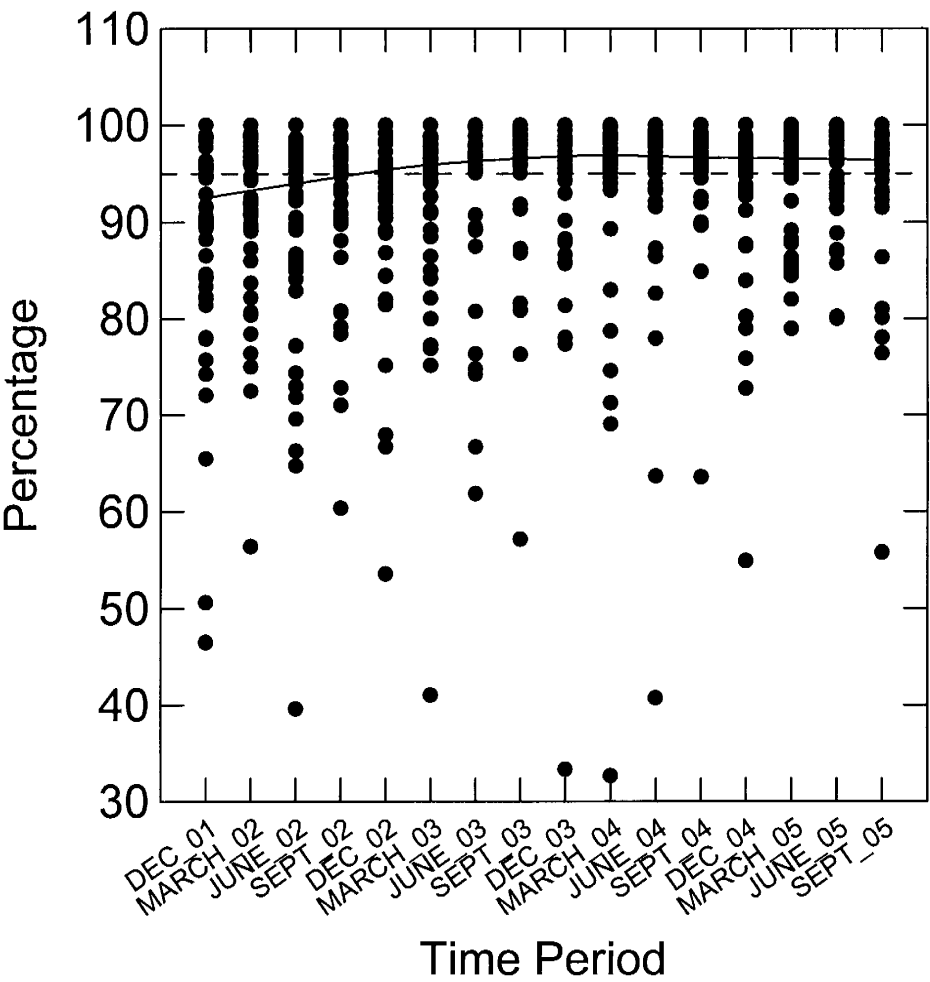
Indicator 3b: Percentage of Adults with Mental Illness Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment With a Professional

	October - December 2004			January - March 2005			April - June 2005			July - September 2005			Fiscal Year Percentage
	Percentage Q1	# MI Adults Starting Ongoing Service Q1	# MI Adults Starting Ongoing Service within 14 Calendar Days Q1	Percentage Q2	# MI Adults Starting Ongoing Service Q2	# MI Adults Starting Ongoing Service within 14 Calendar Days Q2	Percentage Q3	# MI Adults Starting Ongoing Service Q3	# MI Adults Starting Ongoing Service within 14 Calendar Days Q3	Percentage Q4	# MI Adults Starting Ongoing Service Q4	# MI Adults Starting Ongoing Service within 14 Calendar Days Q4	
Allegan	95.40%	87	83	98.15%	54	53	100.00%	77	77	100.00%	62	62	98.21
AuSable	94.85%	97	92	85.06%	87	74	91.40%	93	85	96.83%	126	122	92.56
Barry	98.67%	75	74	98.97%	97	96	97.14%	70	68	98.84%	86	85	98.48
Bay-Arenac	98.81%	168	166	99.38%	162	161	99.22%	128	127	97.83%	138	135	98.83
Berrien	87.50%	112	98	84.83%	145	123	86.84%	152	132	95.79%	190	182	89.32
CEI	95.83%	72	69	94.59%	74	70	96.39%	83	80	95.12%	82	78	95.50
CMH Central MI	93.80%	371	348	87.79%	303	266	94.82%	251	238	97.33%	412	401	93.72
Copper	100.00%	21	21	96.97%	33	32	92.86%	42	39	96.88%	32	31	96.09
Detroit-Wayne	97.59%	457	446	96.32%	489	471	93.87%	555	521	94.31%	685	646	95.33
Genesee	78.97%	252	199	78.96%	328	259	80.19%	313	251	80.09%	432	346	79.62
Gogebic	100.00%	38	38	100.00%	42	42	96.15%	26	25	100.00%	16	16	99.18
Gratiot	100.00%	23	23	100.00%	21	21	100.00%	22	22	100.00%	14	14	100.00
Hiawatha	100.00%	65	65	100.00%	58	58	100.00%	51	51	100.00%	62	62	100.00
Huron	100.00%	27	27	95.65%	23	22	92.86%	28	26	96.00%	25	24	96.12
Ionia	54.90%	51	28	97.06%	34	33	100.00%	62	62	98.08%	52	51	87.44
Kalamazoo	94.81%	77	73	97.14%	70	68	92.65%	68	63	91.49%	94	86	93.85
Kent	80.19%	530	425	81.99%	594	487	88.83%	564	501	81.02%	590	478	83.01
Lapeer	100.00%	34	34	100.00%	31	31	100.00%	40	40	100.00%	49	49	100.00
Lenawee	97.10%	69	67	89.13%	46	41	80.00%	40	32	55.77%	52	29	81.64
Lifeways	96.21%	132	127	94.53%	128	121	97.08%	137	133	93.33%	105	98	95.42
Livingston	100.00%	37	37	100.00%	25	25	93.55%	31	29	100.00%	30	30	98.37
Macomb	93.20%	250	233	98.24%	284	279	96.65%	328	317	97.11%	380	369	96.46
Manistee-Benzie	96.77%	31	30	97.73%	44	43	100.00%	34	34	100.00%	9	9	98.31
Monroe	96.67%	60	58	96.00%	50	48	98.28%	58	57	100.00%	70	70	97.90
Montcalm	100.00%	48	48	100.00%	69	69	94.59%	74	70	100.00%	104	104	98.64
Muskegon	96.23%	159	153	100.00%	170	170	99.43%	174	173	98.16%	163	160	98.50
Newaygo	98.88%	89	88	100.00%	68	68	96.34%	82	79	97.62%	84	82	98.14
Northern Lakes	97.92%	192	188	97.11%	173	168	92.31%	156	144	96.64%	149	144	96.12
Northeast	92.68%	41	38	85.42%	48	41	98.00%	50	49	97.73%	44	43	93.44
North Country	87.70%	122	107	84.43%	167	141	98.36%	122	120	97.47%	158	154	91.74
Northpointe	95.00%	60	57	95.95%	74	71	96.83%	63	61	100.00%	74	74	97.05
Oakland	95.71%	350	335	95.19%	437	416	96.43%	392	378	95.19%	520	495	95.59
Ottawa	98.17%	109	107	86.03%	136	117	87.10%	62	54	99.17%	120	119	92.97
Pathways	83.93%	56	47	86.30%	73	63	85.71%	49	42	78.05%	41	32	84.02
Pines	72.73%	88	64	88.24%	68	60	100.00%	58	58	96.67%	90	87	88.49
Saginaw	96.55%	58	56	92.16%	51	47	92.31%	39	36	76.40%	89	68	87.34
Sanilac	100.00%	44	44	97.50%	40	39	100.00%	57	57	100.00%	56	56	99.49
Shiawassee	75.86%	87	66	98.39%	62	61	98.75%	80	79	98.15%	54	53	91.52
St. Clair	95.12%	123	117	99.17%	121	120	98.89%	90	89	93.02%	86	80	96.67
St. Joseph	91.18%	34	31	100.00%	93	93	97.06%	68	66	100.00%	15	15	97.62
Summit Pointe	95.38%	65	62	95.83%	96	92	98.78%	82	81	95.33%	107	102	96.29
Tuscola	97.56%	41	40	97.78%	45	44	100.00%	49	49	86.36%	44	38	95.53
Van Buren	100.00%	77	77	100.00%	132	132	100.00%	101	101	100.00%	101	101	100.00
Washtenaw	95.65%	46	44	100.00%	19	19	97.22%	36	35	92.31%	26	24	96.06
West Michigan	97.70%	87	85	98.89%	90	89	94.78%	115	109	98.13%	107	105	97.24
Woodlands	96.77%	62	60	96.83%	63	61	94.12%	51	48	98.15%	54	53	96.52
	92.29%	5,174	4,775	92.53%	5,517	5,105	94.06%	5,303	4,988	93.14%	6,079	5,652	

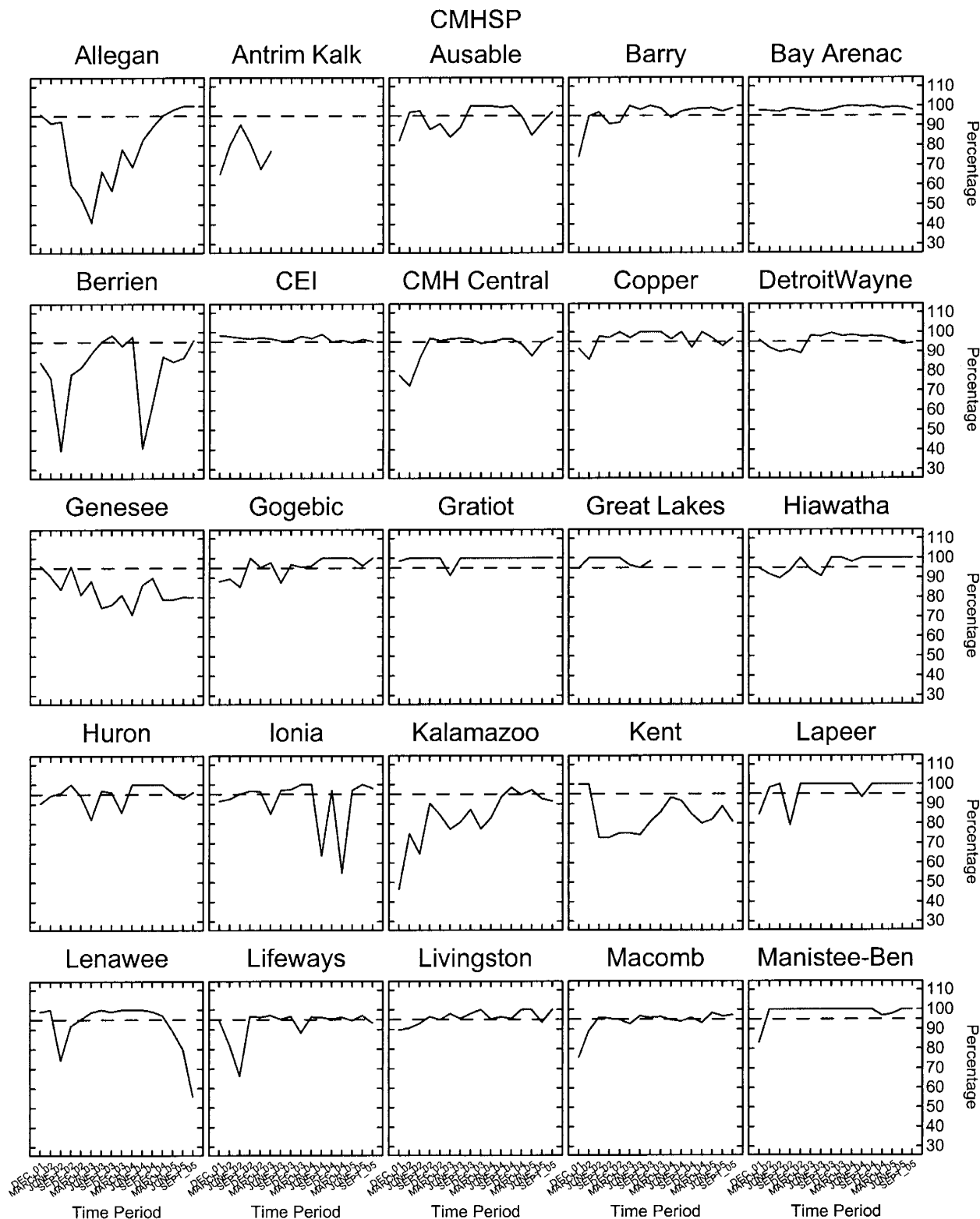
# Percentage of Adults with Mental Illness Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment with a Professional



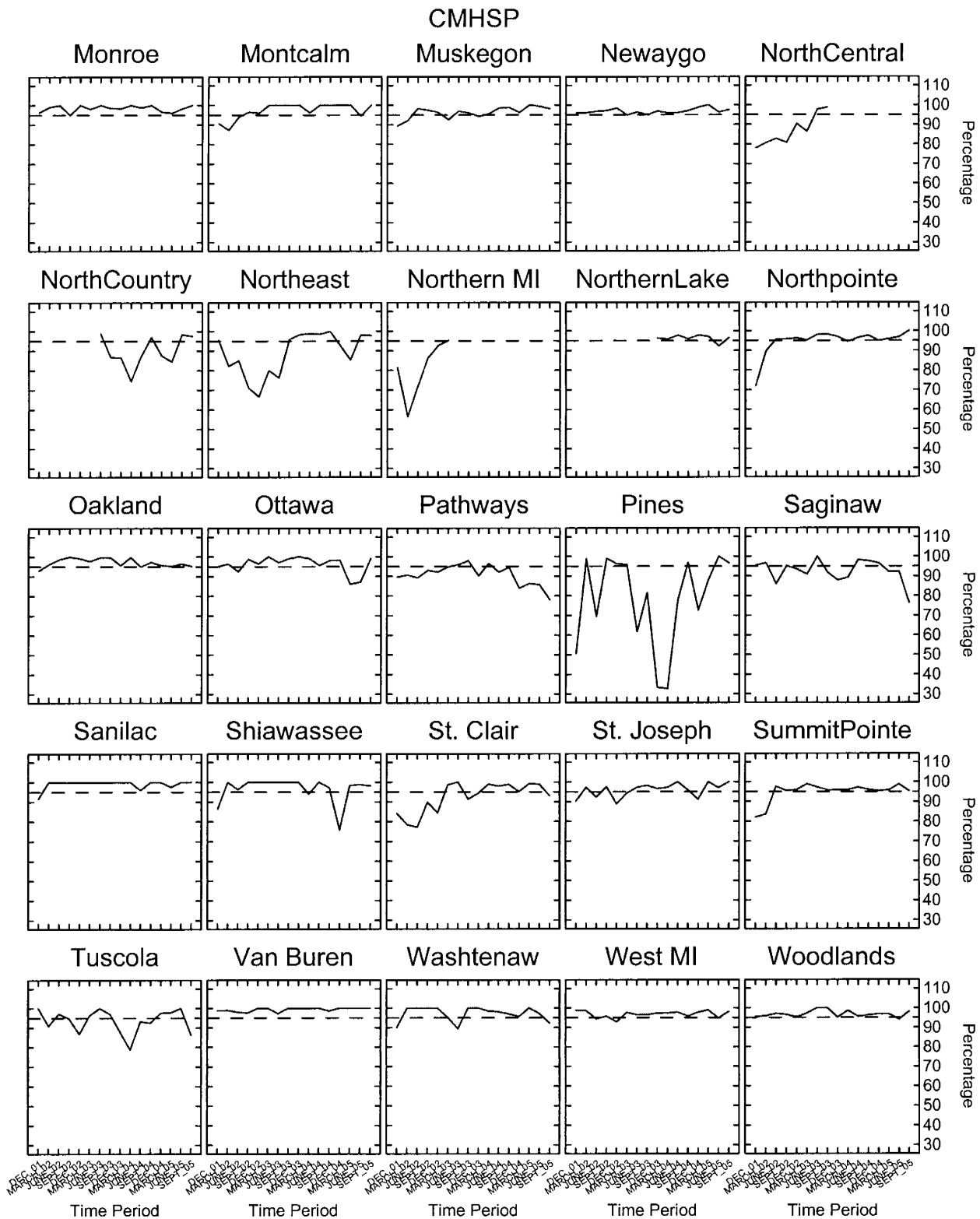
Scatterplot 3b: % Starting On-going Svs. Within 14 Days  
(Adults with Mental Illness)



# Indicator No.3b- % Starting On-going Svs. Within 14 Days (Adults with Mental Illness)



# Indicator No. 3b - Page Two



*Indicator 3c. Access: Timeliness – Percentage of children with developmental disabilities starting any needed on-going service within 14 days of a non-emergent assessment with a professional. The standard is 95 percent within 14 days.*

**Rationale for Use:**

The amount of time between professional assessment and the delivery of needed treatments and supports addresses a somewhat different aspect of access to care than Indicator 2. Delay in the delivery of needed services and supports may lead to exacerbation of symptoms and distress and poorer role functioning.

**Definitions:**

- **Assessment** means face-to-face assessment with a professional that results in a decision whether to provide ongoing CMHSP service.
- **Days** are calendar days.
- **Non-emergent assessment** and services **exclude** pre-admission screening for and receipt of psychiatric in-patient care.
- **Ongoing service** means any recommended CMHSP service, including case management, respite care, etc. For purposes of this data collection, the assessment session shall not be considered the start of ongoing service. However, another service delivered by a different person (e.g., psychiatric service) on the same day may be considered ongoing service.

**Method of Calculation:**

- **Numerator:** The number of children with developmental disabilities starting any needed on-going service within 14 days of a non-emergent face-to-face assessment with a professional.
- **Denominator:** The number of children with developmental disabilities for which the start of non-emergent on-going service took place during the time period. Consumers who request ongoing services outside the 14-day period or do not show for an appointment may be excluded from the count.

**Note:** If more than a single assessment is performed, the time calculation should be based on the first.

**Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	31	30	36	35
Minimum	0.000	0.000	0.000	62.500
Maximum	100.000	100.000	100.000	100.000
Median	100.000	100.000	100.000	100.000
Mean	91.322	90.381	89.505	97.614

**Comments:**

**Historical trends:** This indicator has been in place since FY '02. The trend line (lowess smooth line) of the longitudinal scatter plot shows a static trend at 100 percent, clearly above the 95 percent standard. The scatterplot also shows that there has been very little variation or spread among the CMHSPs since FY '02.

*Indicator 3c continued:*

**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, 10 of the 46 CMHSPs did not meet the 95 percent standard. The CMHSPs failing to meet the standard are: Saginaw (92.59%), Lifeways (90.91%\*), Northern Lakes (90%), Lenawee (90%\*), Kalamazoo (90%\*), Macomb (88.1%), CEI (84.62%), CMH Central (83.33%), Northeast (83.33%\*), West Michigan (83.33%\*), Pathways (80.77%), Genesee (71.32%), Huron (50%\*), and Lapeer (50%\*). It should be noted that Manistee-Benzie, AuSable, Tuscola, and Summit Pointe report that they did not provide any non-emergent assessments to children with developmental disabilities.

It should be noted that Genesee did not meet the 95 percent standard during any quarter of FY '05.

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\* Percentage based on fewer than 20 consumers.

Indicator 3c: Percentage of Children with Developmental Disabilities Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment With a Professional

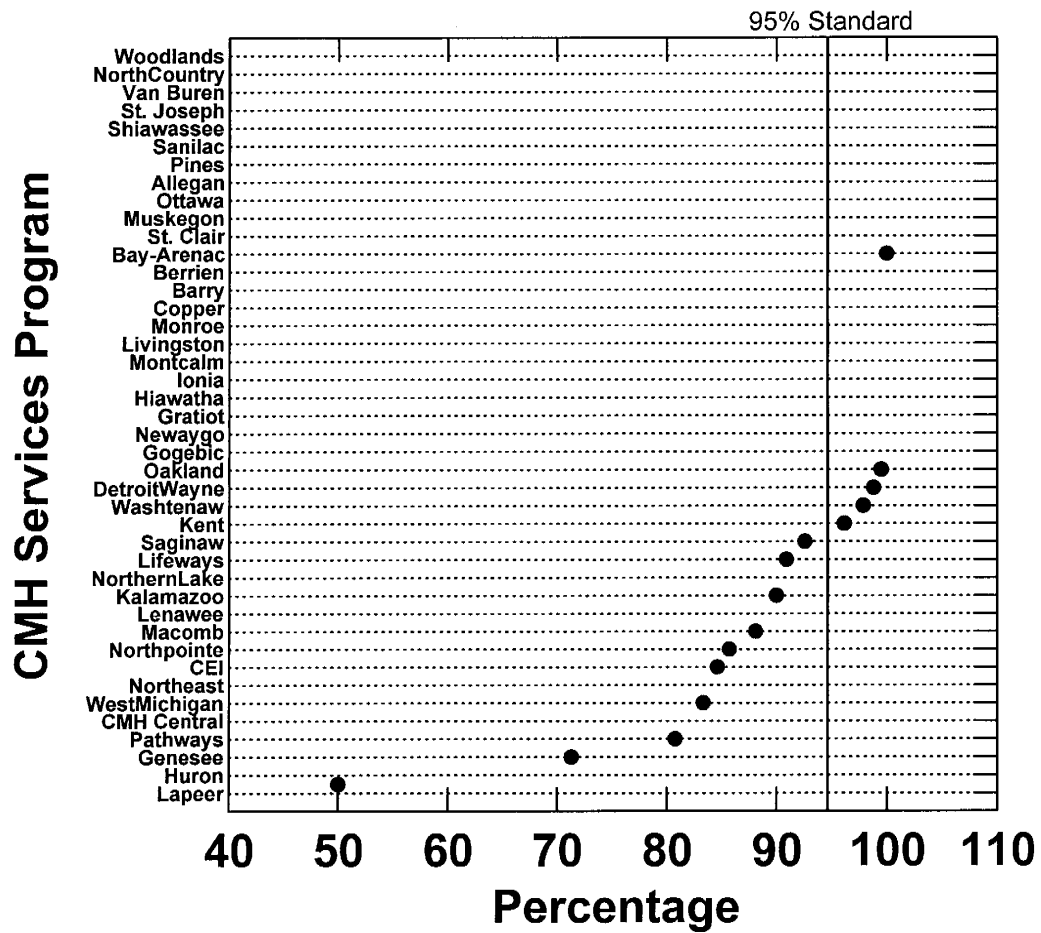
	October - December 2004			January - March 2005			April - June 2005			July - September 2005			Fiscal Year Percentage
	Percentage Q1	# DD Children Starting Ongoing Service Q1	# DD Children Starting Ongoing Service within 14 Calendar Days Q1	Percentage Q2	# DD Children Starting Ongoing Service Q2	# DD Children Starting Ongoing Service within 14 Calendar Days Q2	Percentage Q3	# DD Children Starting Ongoing Service Q3	# DD Children Starting Ongoing Service within 14 Calendar Days Q3	Percentage Q4	# DD Children Starting Ongoing Service Q4	# DD Children Starting Ongoing Service within 14 Calendar Days Q4	
Allegan	100.00%	2	2	100.00%	1	1	100.00%	2	2	100.00%	1	1	100.00
AuSable	-	0	0	-	0	0	-	0	0	-	0	0	
Barry	-	0	0	-	0	0	100.00%	1	1	-	0	0	100.00
Bay-Arenac	100.00%	1	1	-	0	0	-	0	0	100.00%	2	2	100.00
Berrien	-	0	0	100.00%	1	1	-	0	0	-	0	0	100.00
CEI	100.00%	10	10	100.00%	9	9	0.00%	6	0	100.00%	14	14	84.62
CMH Central MI	100.00%	3	3	40.00%	5	2	83.33%	6	5	100.00%	10	10	83.33
Copper	-	0	0	-	0	0	-	0	0	100.00%	1	1	100.00
Detroit-Wayne	100.00%	16	16	100.00%	22	22	100.00%	23	23	95.65%	23	22	98.81
Genesee	80.00%	20	16	71.43%	35	25	76.47%	34	26	62.50%	40	25	71.32
Gogebic	-	0	0	100.00%	2	2	100.00%	3	3	-	0	0	100.00
Gratiot	100.00%	3	3	100.00%	1	1	-	0	0	100.00%	1	1	100.00
Hiawatha	100.00%	3	3	-	0	0	100.00%	3	3	100.00%	5	5	100.00
Huron	-	0	0	-	0	0	0.00%	1	0	100.00%	1	1	50.00
Ionia	100.00%	1	1	100.00%	3	3	100.00%	1	1	100.00%	1	1	100.00
Kalamazoo	100.00%	2	2	100.00%	1	1	75.00%	4	3	100.00%	3	3	90.00
Kent	0.00%	1	0	100.00%	9	9	100.00%	6	6	100.00%	10	10	96.15
Lapeer	100.00%	1	1	0.00%	2	0	-	0	0	100.00%	1	1	50.00
Lenawee	100.00%	2	2	100.00%	2	2	50.00%	2	1	100.00%	4	4	90.00
Lifeways	83.33%	6	5	-	0	0	100.00%	5	5	-	0	0	90.91
Livingston	100.00%	3	3	-	0	0	100.00%	4	4	100.00%	5	5	100.00
Macomb	62.50%	8	5	83.33%	12	10	100.00%	11	11	100.00%	11	11	88.10
Manistee-Benzie	-	0	0	-	0	0	100.00%	1	1	-	0	0	
Monroe	100.00%	7	7	-	0	0	100.00%	3	3	100.00%	2	2	100.00
Montcalm	-	0	0	100.00%	1	1	100.00%	4	4	100.00%	1	1	100.00
Muskegon	100.00%	8	8	100.00%	12	12	100.00%	15	15	100.00%	12	12	100.00
Newaygo	-	0	0	-	0	0	-	0	0	100.00%	1	1	100.00
Northern Lakes	75.00%	8	6	100.00%	8	8	85.71%	7	6	100.00%	7	7	90.00
Northeast	100.00%	2	2	66.67%	3	2	100.00%	1	1	-	0	0	83.33
North Country	100.00%	1	1	100.00%	4	4	100.00%	1	1	100.00%	2	2	100.00
Northpointe	-	0	0	50.00%	2	1	100.00%	2	2	100.00%	3	3	85.71
Oakland	100.00%	21	21	100.00%	38	38	98.88%	89	88	100.00%	52	52	99.50
Ottawa	-	0	0	-	0	0	100.00%	1	1	100.00%	1	1	100.00
Pathways	77.78%	9	7	100.00%	2	2	77.78%	9	7	83.33%	6	5	80.77
Pines	100.00%	1	1	100.00%	1	1	100.00%	1	1	100.00%	1	1	100.00
Saginaw	85.71%	7	6	100.00%	7	7	100.00%	9	9	75.00%	4	3	92.59
Sanilac	100.00%	2	2	100.00%	3	3	100.00%	2	2	100.00%	2	2	100.00
Shiawassee	-	0	0	-	0	0	100.00%	2	2	-	0	0	100.00
St. Clair	100.00%	5	5	100.00%	8	8	100.00%	7	7	100.00%	10	10	100.00
St. Joseph	-	0	0	-	0	0	-	0	0	100.00%	2	2	100.00
Summit Pointe	-	0	0	-	0	0	-	0	0	-	0	0	
Tuscola	-	0	0	-	0	0	100.00%	1	1	-	0	0	
Van Buren	100.00%	5	5	100.00%	4	4	100.00%	4	4	100.00%	2	2	100.00
Washtenaw	100.00%	27	27	100.00%	9	9	75.00%	4	3	100.00%	7	7	97.87
West Michigan	66.67%	3	2	100.00%	2	2	-	0	0	100.00%	1	1	83.33
Woodlands	100.00%	4	4	100.00%	2	2	100.00%	1	1	-	0	0	100.00
	92.19%	192	177	91.00%	211	192	91.67%	276	253	92.77%	249	231	

\* Percentage based on fewer than 20 consumers.

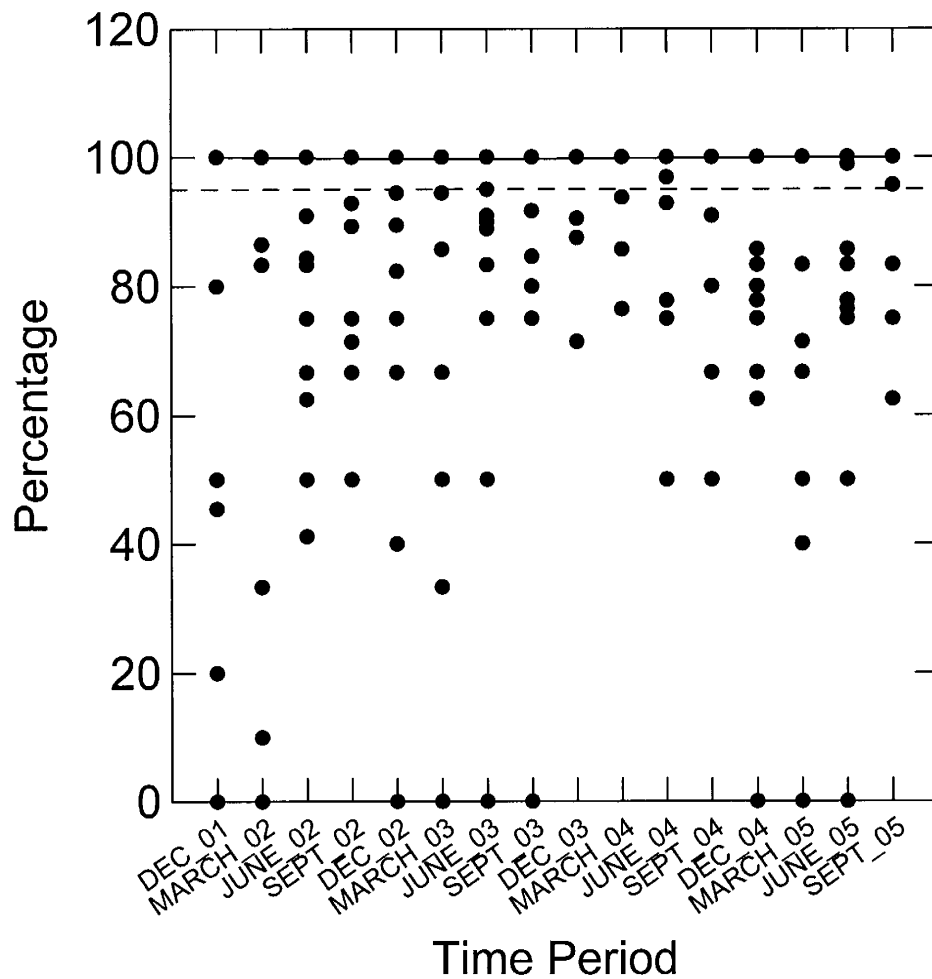
\* Percentage based on fewer than 20 consumers.



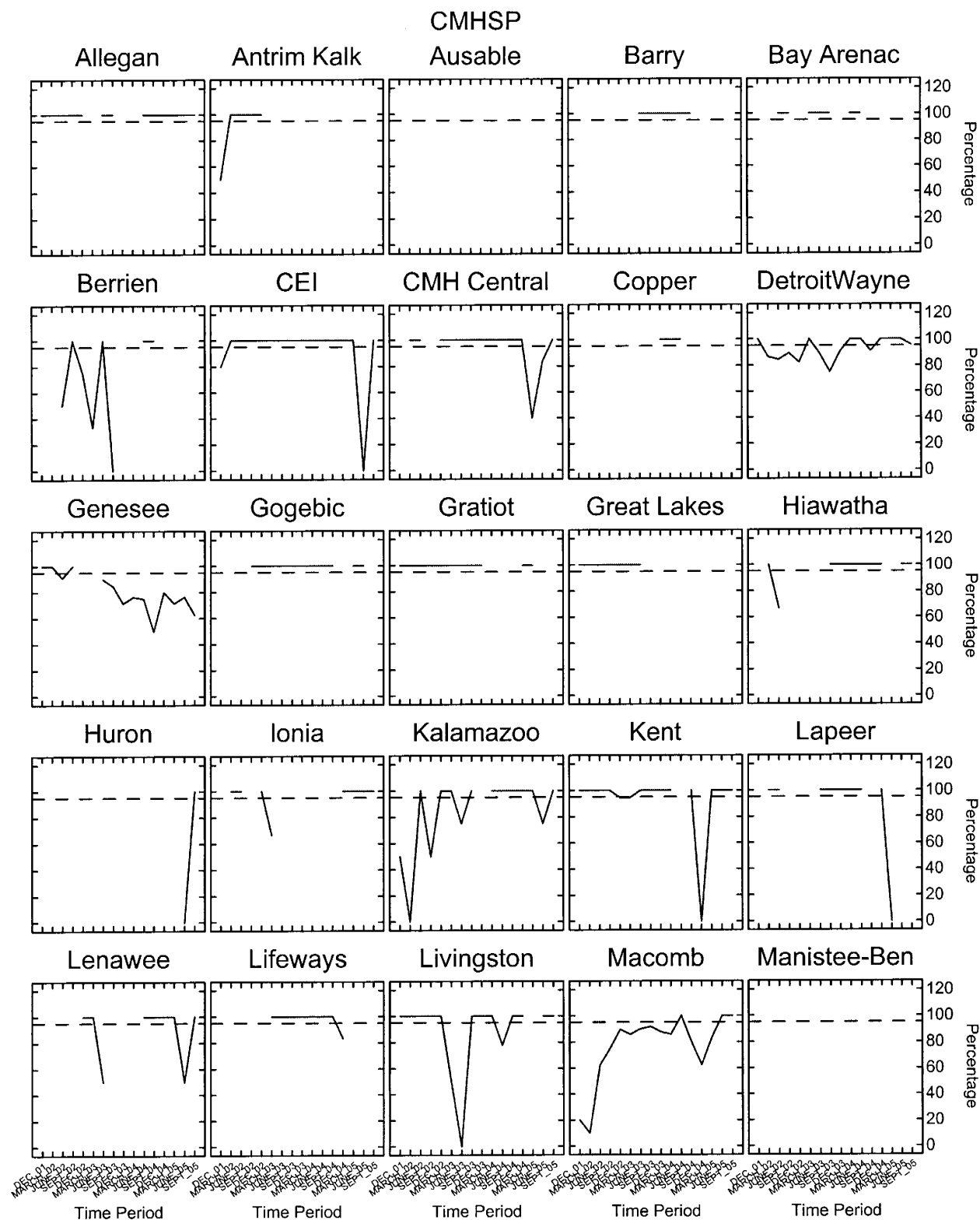
# Percentage of DD Children Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment with a Professional



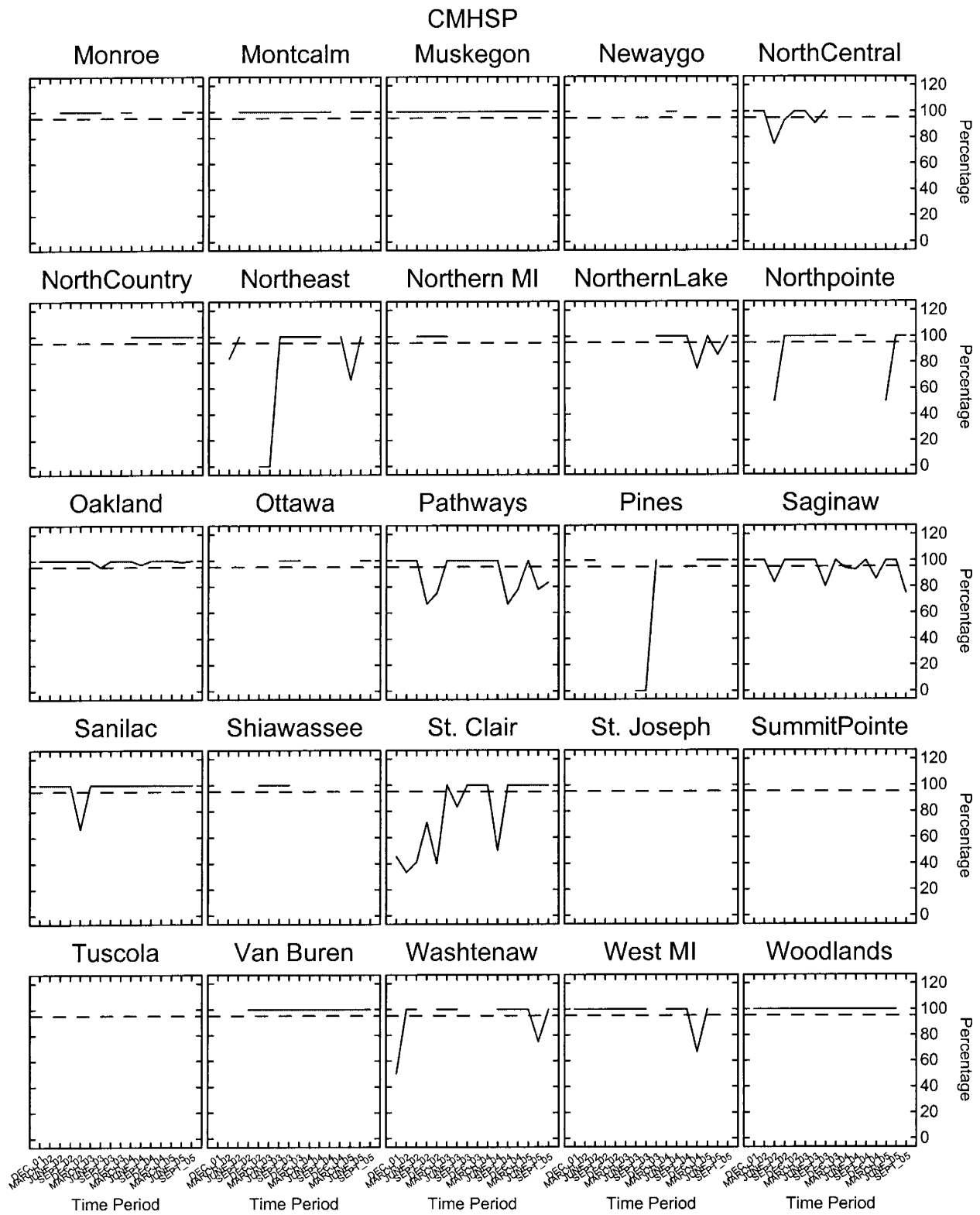
Scatterplot 3c: % Starting On-going Svs. Within 14 Days  
(Children with Developmental Disabilities)



Indicator No.3c- % Starting On-going Svs. Within 14 Days  
(Children with Developmental Disabilities)



# Indicator No. 3c - Page Two



*Indicator 3d. Access: Timeliness – Percentage of adults with developmental disabilities starting any needed on-going service within 14 days of a non-emergent assessment with a professional. The standard is 95 percent within 14 days.*

#### **Rationale for Use:**

The amount of time between professional assessment and the delivery of needed treatments and supports addresses a somewhat different aspect of access to care than Indicator 2. Delay in the delivery of needed services and supports may lead to exacerbation of symptoms and distress and poorer role functioning.

#### **Definitions:**

- **Assessment** means face-to-face assessment with a professional that results in a decision whether to provide ongoing CMHSP service.
- **Days** are calendar days.
- **Non-emergent assessment** and services **exclude** pre-admission screening for and receipt of psychiatric in-patient care.
- **Ongoing service** means any recommended CMHSP service, including case management, respite care, etc. For purposes of this data collection, the assessment session shall not be considered the start of ongoing service. However, another service delivered by a different person (e.g., psychiatric service) on the same day may be considered ongoing service.

#### **Method of Calculation:**

- **Numerator:** The number of adults with developmental disabilities starting any needed on-going service within 14 days of a non-emergent face-to-face assessment with a professional.
- **Denominator:** The number of adults with developmental disabilities for which the start of non-emergent on-going service took place during the time period. Consumers who request ongoing services outside the 14-day period or do not show for an appointment may be excluded from the count.

**Note:** If more than a single assessment is performed, the time calculation should be based on the first.

#### **Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	41	41	44	40
Minimum	0.000	66.670	66.670	0.000
Maximum	100.000	100.000	100.000	100.000
Median	100.000	100.000	100.000	100.000
Mean	88.604	93.662	93.974	90.934

#### **Comments:**

**Historical trends:** This indicator has been in place since FY '02. The trend line (lowess smooth line) of the longitudinal scatter plot shows a static trend at 100 percent, clearly above the 95 percent standard. The scatterplot also shows that there has been somewhat more variation in the spread among the CMHSPs during FY '05. This reflects a greater number of CMHSPs falling below the 95 percent standards (13 for FY'04, 24 for FY'05).

*Indicator 3d continued:*

**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, 24 of the 46 CMHSPs did not meet the 95 percent standard. The CMHSPs failing to meet the standard are: CMH Central (92.59%), Kent (92.41%), Northpointe (92.31%\*), Bay-Arenac (91.67%), Barry (90.91%\*), Lifeways (90.48%), Pines (90%\*), Sanilac (90%\*), Berrien (88.46%), Detroit/Wayne (88.14%), Monroe (87.5%\*), Lapeer (87.5%\*), Allegan (86.67%\*), Kalamazoo (86.49%), Ottawa (85.71%), Pathways (84.62%), Macomb (83.54%), Tuscola (83.33%\*), CEI (81.97%), Huron (81.82%\*), Saginaw (75.76%), Genesee (74.29%), Shiawassee (72.73%\*), Lenawee (66.67%\*).

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\* Percentage based on fewer than 20 consumers.

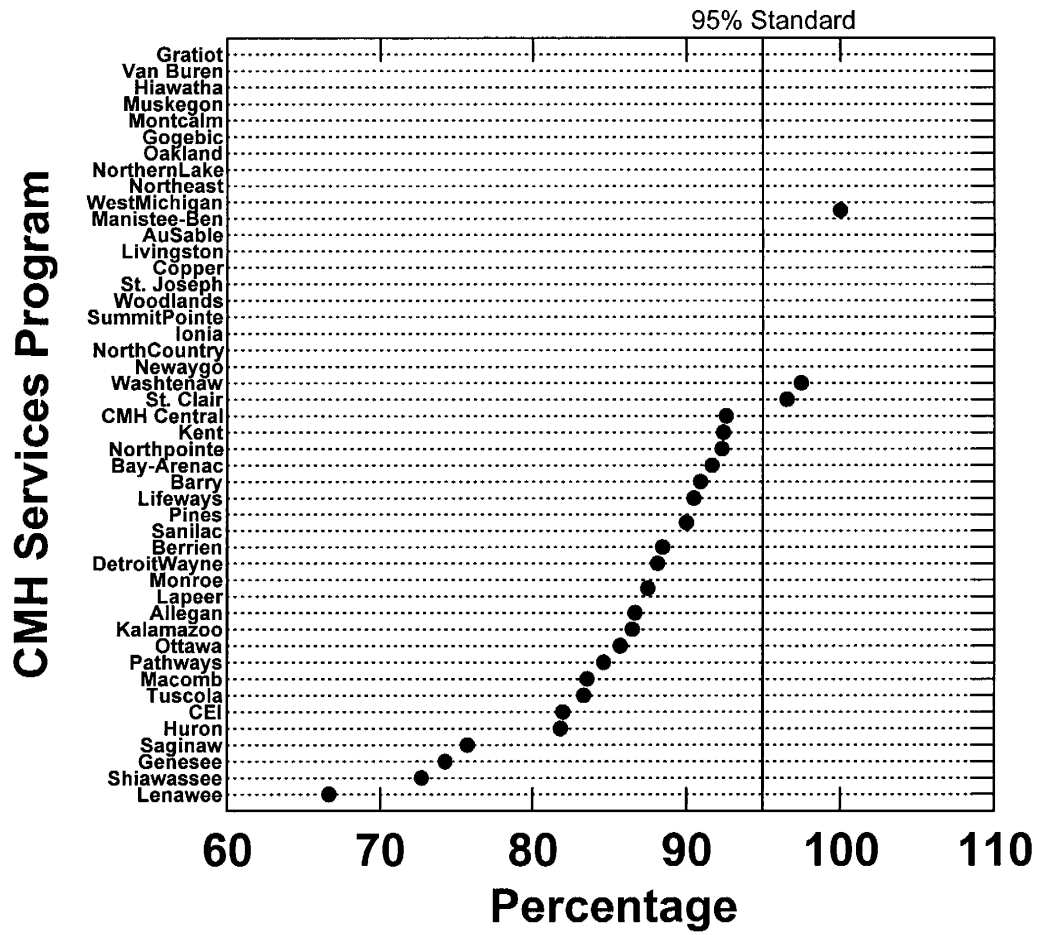
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Indicator 3d: Percentage of Adults with Developmental Disabilities Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment With a Professional

	October - December 2004			January - March 2005			April - June 2005			July - September 2005			Fiscal Year Percentage
	Percentage Q1	# DD Adults Starting Ongoing Service Q1	# DD Adults Starting Ongoing Service within 14 Calendar Days Q1	Percentage Q2	# DD Adults Starting Ongoing Service Q2	# DD Adults Starting Ongoing Service within 14 Calendar Days Q2	Percentage Q3	# DD Adults Starting Ongoing Service Q3	# DD Adults Starting Ongoing Service within 14 Calendar Days Q3	Percentage Q4	# DD Adults Starting Ongoing Service Q4	# DD Adults Starting Ongoing Service within 14 Calendar Days Q4	
Allegan	80.00%	5	4	100.00%	2	2	75.00%	4	3	100.00%	4	4	86.67*
AuSable	100.00%	6	6	100.00%	5	5	100.00%	2	2	100.00%	4	4	100.00
Barry	100.00%	2	2	100.00%	2	2	66.67%	3	2	100.00%	4	4	90.91*
Bay-Arenac	100.00%	5	5	100.00%	6	6	90.00%	10	9	66.67%	3	2	91.67
Berrien	75.00%	4	3	100.00%	5	5	80.00%	10	8	100.00%	7	7	88.46
CEI	71.43%	7	5	90.91%	11	10	68.18%	22	15	95.24%	21	20	81.97
CMH Central MI	100.00%	6	6	87.50%	8	7	100.00%	7	7	83.33%	6	5	92.59
Copper	100.00%	1	1	100.00%	2	2	-	0	0	-	0	0	100.00
Detroit-Wayne	70.59%	17	12	100.00%	14	14	87.50%	8	7	95.00%	20	19	88.14
Genesee	28.57%	7	2	69.23%	13	9	95.45%	22	21	71.43%	28	20	74.29
Gogebic	100.00%	2	2	100.00%	2	2	100.00%	3	3	100.00%	2	2	100.00
Gratiot	100.00%	3	3	100.00%	2	2	100.00%	1	1	100.00%	1	1	100.00
Hiawatha	-	0	0	100.00%	2	2	100.00%	7	7	100.00%	5	5	100.00
Huron	100.00%	3	3	75.00%	4	3	66.67%	3	2	100.00%	1	1	81.82
Ionia	-	0	0	100.00%	4	4	100.00%	2	2	-	0	0	100.00
Kalamazoo	100.00%	8	8	100.00%	12	12	75.00%	4	3	69.23%	13	9	86.49
Kent	100.00%	16	16	100.00%	17	17	92.59%	27	25	78.95%	19	15	92.41
Lapeer	100.00%	1	1	75.00%	4	3	100.00%	2	2	100.00%	1	1	87.50
Lenawee	0.00%	1	0	100.00%	1	1	100.00%	3	3	0.00%	1	0	66.67*
Lifeways	83.33%	6	5	83.33%	6	5	100.00%	3	3	100.00%	6	6	90.48
Livingston	100.00%	5	5	100.00%	5	5	100.00%	2	2	100.00%	1	1	100.00
Macomb	65.38%	26	17	87.50%	16	14	100.00%	21	21	87.50%	16	14	83.54
Manistee-Benzie	100.00%	1	1	-	0	0	-	0	0	-	0	0	100.00
Monroe	100.00%	2	2	75.00%	4	3	100.00%	2	2	-	0	0	87.50
Montcalm	100.00%	1	1	-	0	0	100.00%	2	2	100.00%	1	1	100.00
Muskegon	100.00%	14	14	100.00%	13	13	100.00%	8	8	100.00%	10	10	100.00
Newaygo	-	0	0	100.00%	2	2	100.00%	1	1	100.00%	2	2	100.00
Northern Lakes	100.00%	15	15	100.00%	14	14	100.00%	12	12	100.00%	15	15	100.00
Northeast	100.00%	6	6	100.00%	6	6	100.00%	2	2	100.00%	2	2	100.00
North Country	100.00%	2	2	100.00%	2	2	100.00%	4	4	100.00%	4	4	100.00
Northpointe	100.00%	1	1	100.00%	2	2	80.00%	5	4	100.00%	5	5	92.31
Oakland	100.00%	24	24	100.00%	35	35	100.00%	84	84	100.00%	60	60	100.00
Ottawa	85.71%	7	6	66.67%	6	4	100.00%	3	3	100.00%	5	5	85.71
Pathways	75.00%	4	3	83.33%	6	5	77.78%	9	7	100.00%	7	7	84.62
Pines	75.00%	4	3	-	0	0	100.00%	5	5	100.00%	1	1	90.00
Saginaw	90.91%	11	10	80.00%	5	4	100.00%	7	7	40.00%	10	4	75.76
Sanilac	66.67%	3	2	-	0	0	100.00%	1	1	100.00%	8	6	90.00
Shiawassee	66.67%	6	4	100.00%	1	1	100.00%	1	1	66.67%	3	2	72.73
St. Clair	100.00%	7	7	100.00%	7	7	100.00%	9	9	83.33%	6	5	96.55
St. Joseph	-	0	0	-	0	0	100.00%	1	1	-	0	0	100.00
Summit Pointe	100.00%	4	4	100.00%	2	2	100.00%	6	6	100.00%	1	1	100.00
Tuscola	-	0	0	100.00%	1	1	80.00%	5	4	-	0	0	83.33
Van Buren	100.00%	1	1	100.00%	8	8	100.00%	7	7	100.00%	1	1	100.00
Washtenaw	98.51%	67	66	66.67%	3	2	100.00%	6	6	100.00%	3	3	97.47
West Michigan	100.00%	1	1	100.00%	2	2	100.00%	3	3	100.00%	4	4	100.00
Woodlands	100.00%	6	6	100.00%	2	2	100.00%	4	4	100.00%	2	2	100.00
	89.62%	318	285	93.56%	264	247	93.77%	353	331	90.03%	311	280	

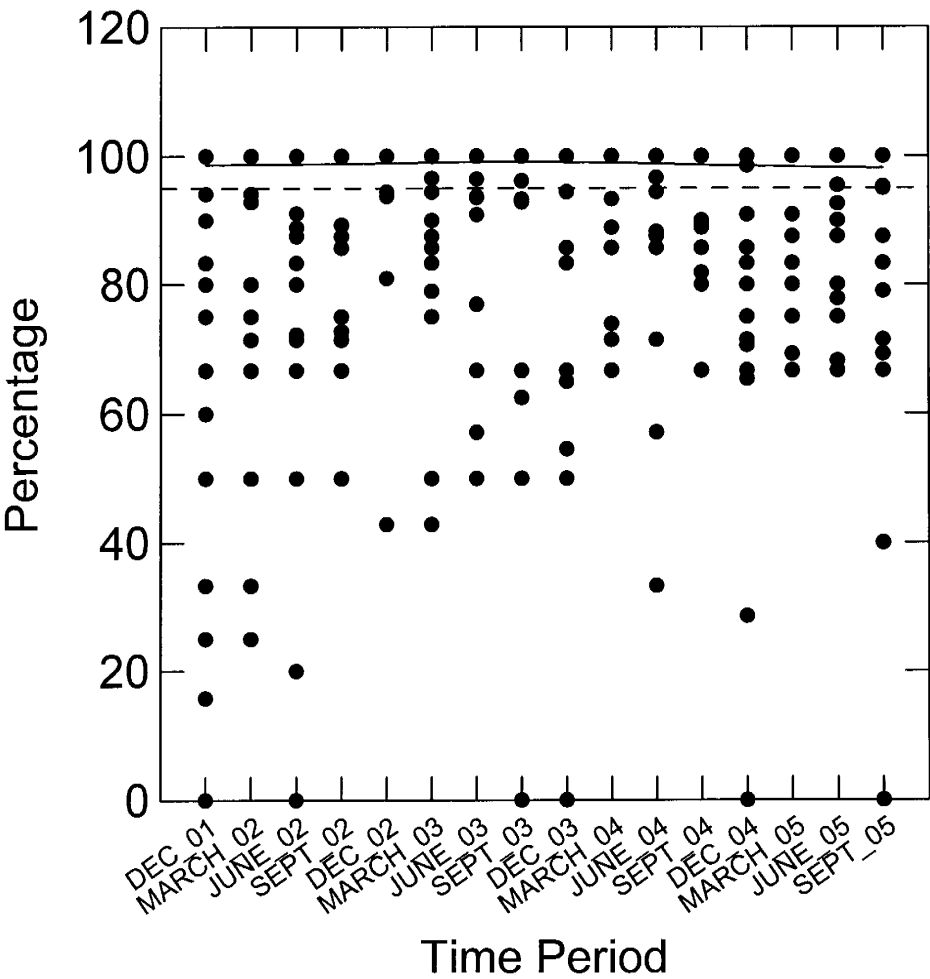
\* Percentage based on fewer than 20 consumers.

# Percentage of DD Adults Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment with a Professional

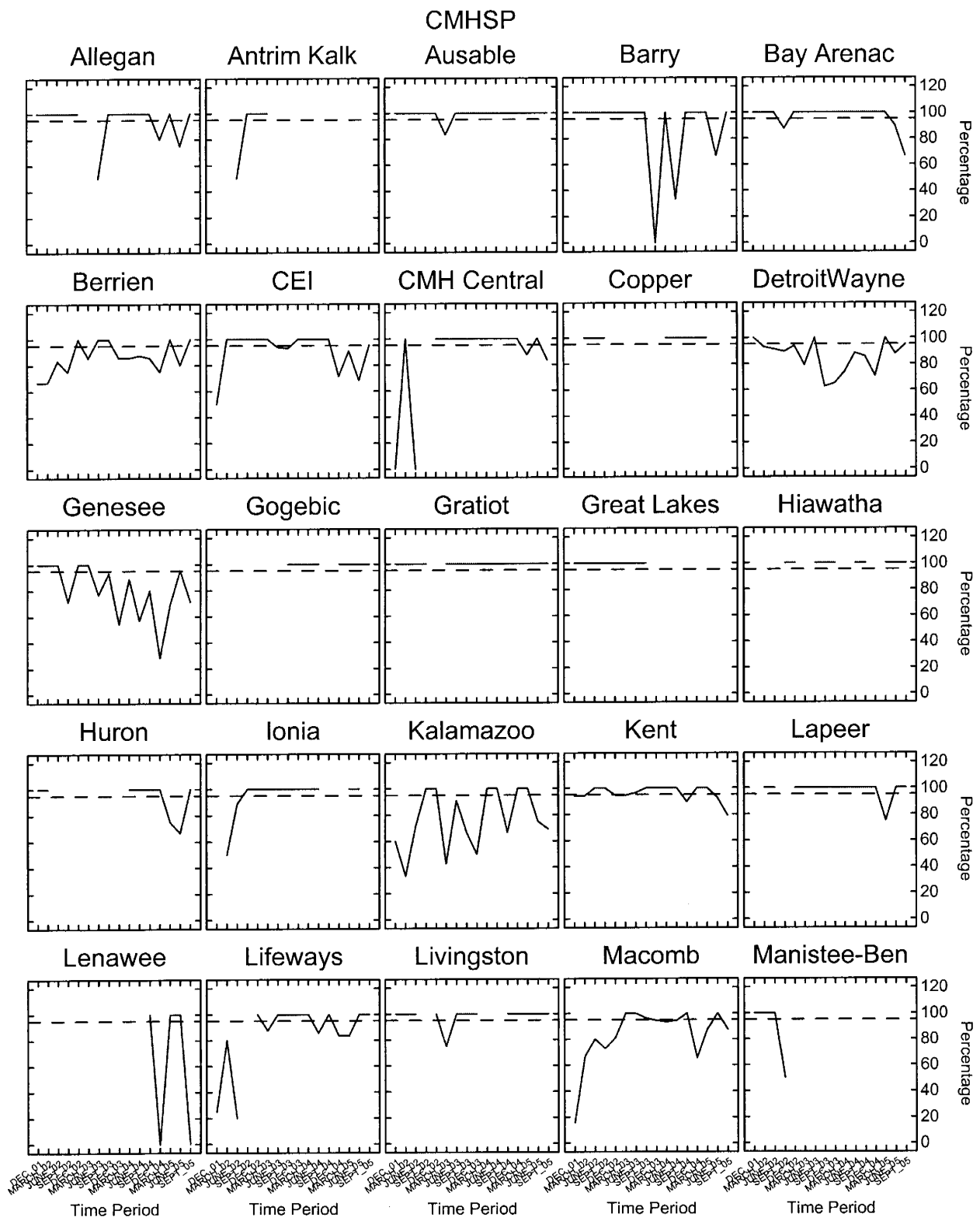




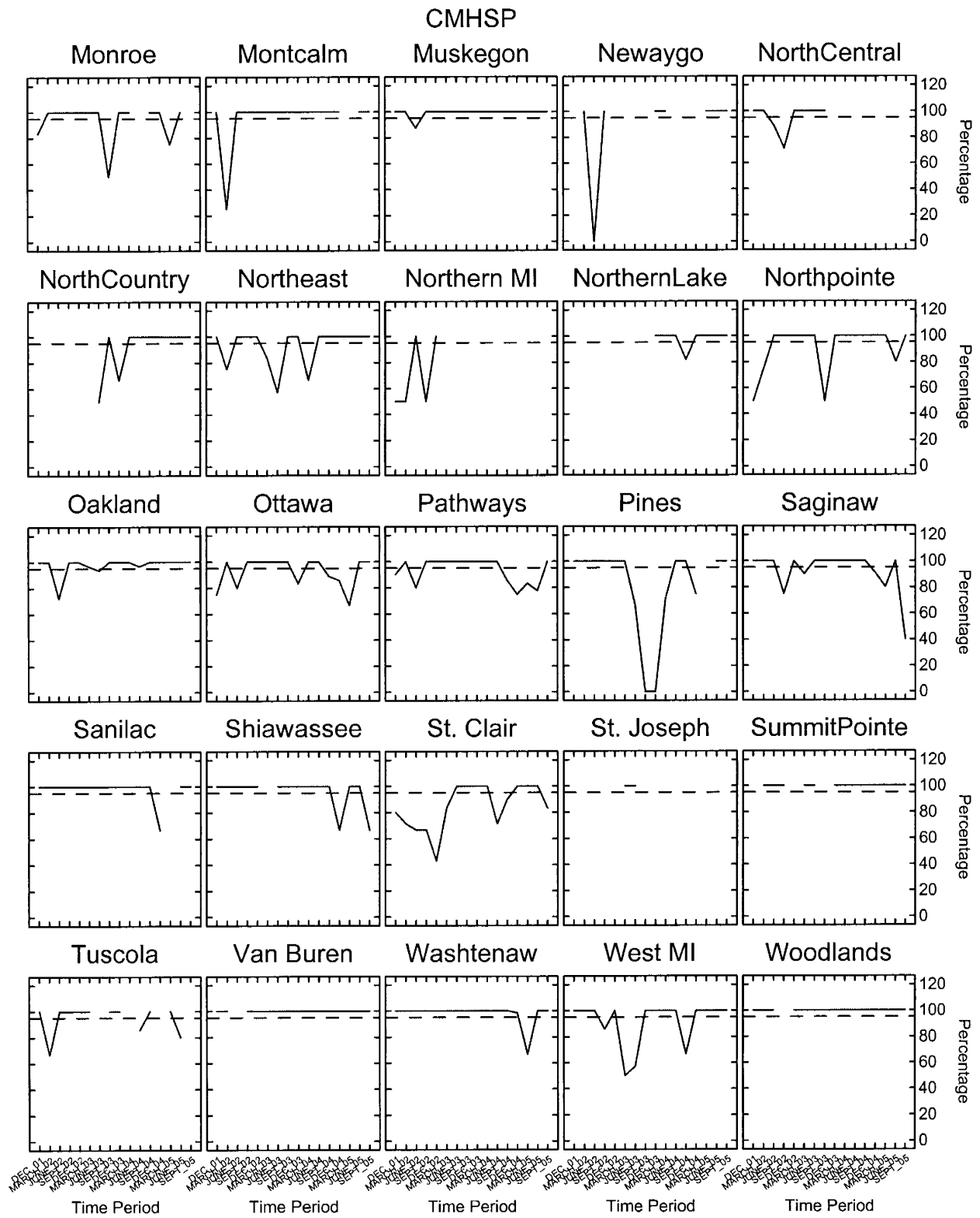
Scatterplot 3d: % Starting On-going Svs. Within 14 Days  
(Adults with Developmental Disabilities)



# Indicator No. 3d- % Starting On-going Svs. Within 14 Days (Adults with Developmental Disabilities)



# Indicator No. 3d - Page Two



*Indicator 5a. Quality of Life: Adverse Consumer Outcomes -- The percentage of children with SED readmitted to an inpatient psychiatric unit within 30 days of discharge from a psychiatric inpatient unit. Fifteen percent or fewer readmissions within 30 days is the standard.*

**Rationale for Use:**

For some persons with serious mental illness, the occasional use of psychiatric inpatient care is essential. However, a rapid readmission following discharge may suggest that persons were prematurely discharged or that the post discharge follow-up was not timely or sufficient. This indicator assesses whether CMHSPs are meeting the department's standard of no more than 15 percent of persons discharged from inpatient units being readmitted within 30 days.

**Method of Calculation:**

- **Numerator:** The number of persons readmitted to an inpatient psychiatric unit within 30 days of discharge.
- **Denominator:** The total number of persons discharged from inpatient psychiatric units during the reporting period.

Note: Starting with the reporting period covering October 1, 2002 to December 31, 2002, this indicator has been separated out into two separate indicators. Indicator number 5a covers SED children and Indicator 5b covers all other persons.

**Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	43	43	42	42
Minimum	0.000	0.000	0.000	0.000
Maximum	20.000	33.330	33.300	50.000
Median	0.000	3.700	0.000	0.000
Mean	4.415	6.951	4.699	7.775

**Comments:**

**Historical trends:** This indicator has been in place since FY '02. The trend line (lowess smooth line) of the longitudinal scatter plot shows a weak increase toward the 15 percent standard. The trend is still very close to zero, however. The scatterplot also shows that there has been very little variation or spread among the CMHSPs since FY '02.

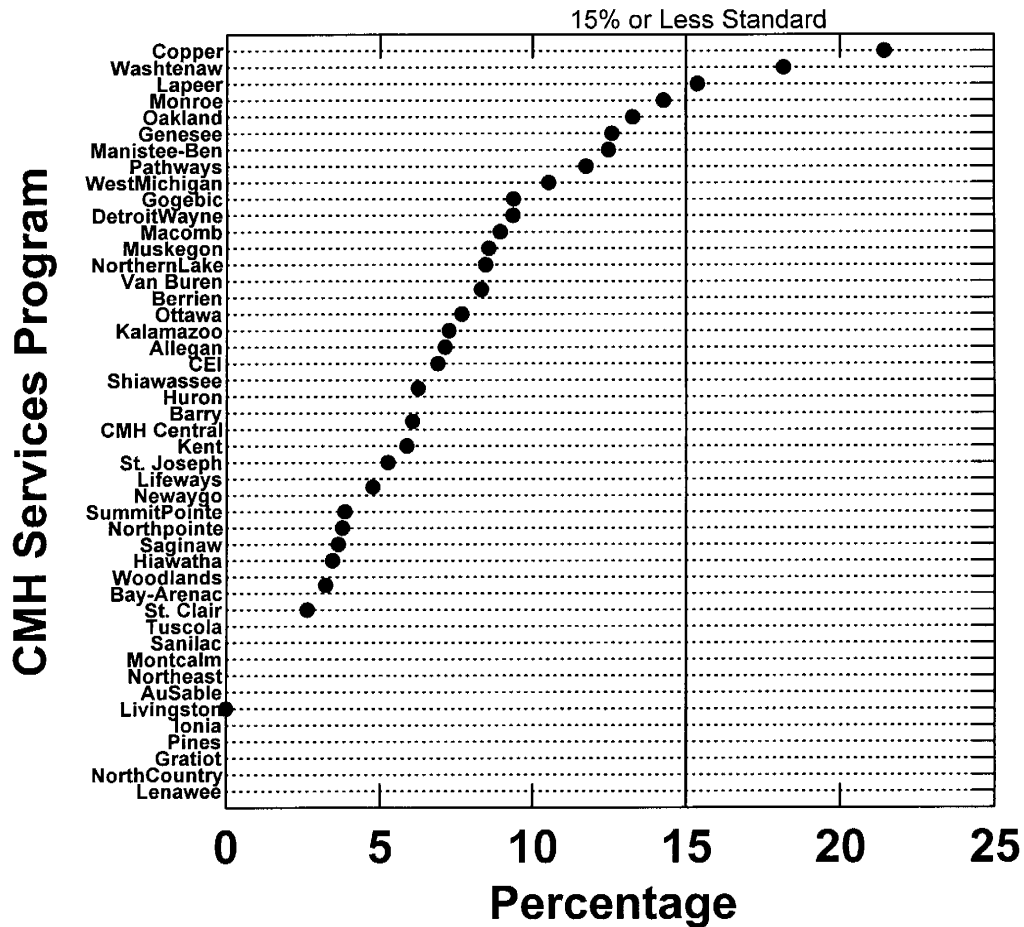
**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, only 3 of the 46 CMHSPs did not meet the 15 percent standard. The CMHSPs failing to meet the standard are: Lapeer (15.38%), Washtenaw (18.18%) and Copper (21.43%)

It should be noted that Washtenaw and Copper did not reach the standard in any quarter of FY'05.

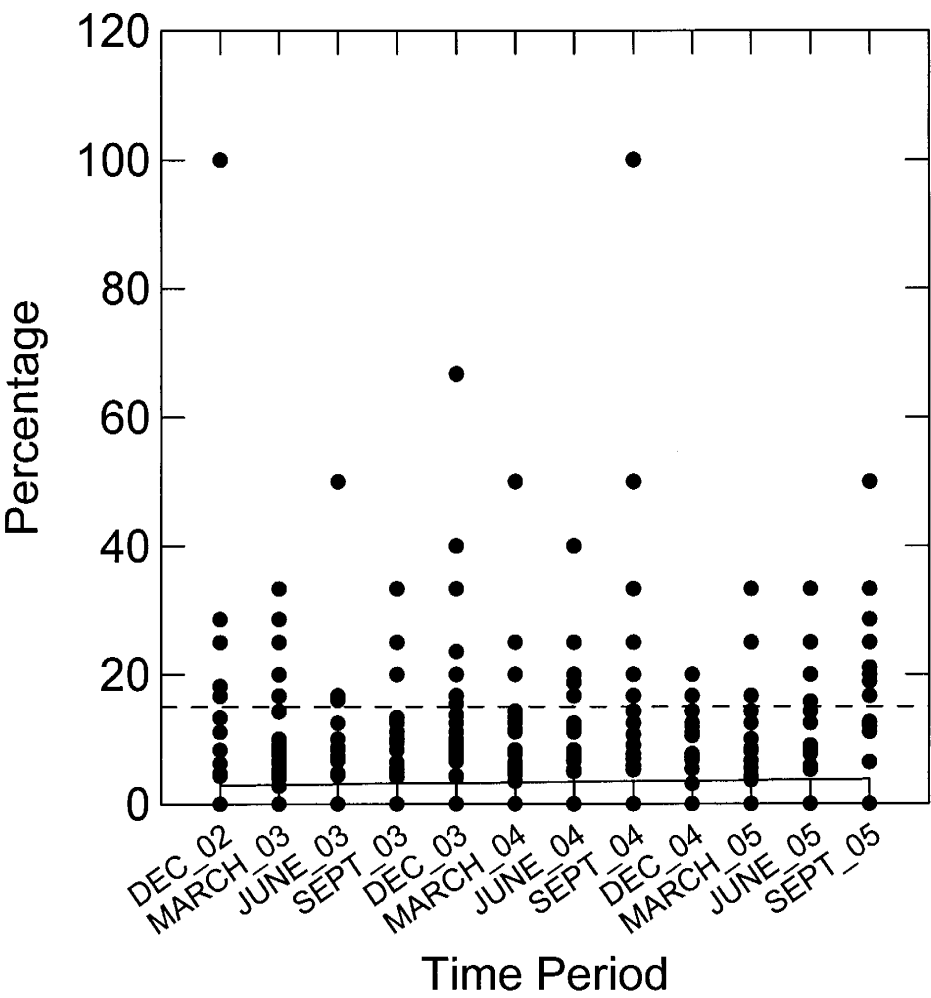
Indicator 5a: Percentage of Readmissions to Inpatient Psychiatric Units Within 30 Days of Discharge from a Psychiatric Inpatient Unit for SED Children

	October - December 2004				January - March 2005				April - June 2005				July - September 2005				Fiscal Year Percentage
	Percentage Q1	# SED Children Screened and Admitted for Care Q1	Number of SED Children Discharged from Care Q1	# SED Children Discharged that were Readmitted Within 30 Days Q1	Percentage Q2	# SED Children Screened and Admitted for Care Q2	Number of SED Children Discharged from Care Q2	# SED Children Discharged that were Readmitted Within 30 Days Q2	Percentage Q3	# SED Children Screened and Admitted for Care Q3	Number of SED Children Discharged from Care Q3	# SED Children Discharged that were Readmitted Within 30 Days Q3	Percentage Q4	# SED Children Screened and Admitted for Care Q4	Number of SED Children Discharged from Care Q4	# SED Children Discharged that were Readmitted Within 30 Days Q4	
Allegan	0.00%	3	3	0	0.00%	7	5	0	33.33%	7	3	1	0.00%	5	3	0	7.14
AuSable	0.00%	6	6	0	0.00%	1	1	0	0.00%	3	3	0	0.00%	0	0	0	0.00
Barry	10.53%	19	19	2	0.00%	3	3	0	0.00%	5	5	0	0.00%	6	6	0	6.06
Bay-Arenac	3.13%	34	32	1	0.00%	24	24	0	0.00%	20	18	0	10.53%	19	19	2	3.23
Berrien	11.11%	9	9	1	12.50%	10	8	1	0.00%	5	3	0	0.00%	4	4	0	8.33
CEI	0.00%	15	12	0	33.33%	12	6	2	0.00%	7	7	0	0.00%	4	4	0	6.90
CMH Central MI	7.69%	13	13	1	0.00%	21	5	0	0.00%	17	9	0	16.67%	6	6	1	6.06
Copper	0.00%	1	1	0	25.00%	4	4	1	25.00%	8	8	2	0.00%	1	1	0	21.43
Detroit-Wayne	7.22%	215	194	14	8.56%	227	187	16	9.02%	259	244	22	12.63%	202	198	25	9.36
Genesee	11.11%	27	18	2	3.70%	39	27	1	15.79%	45	38	6	16.67%	50	36	6	12.61
Gogebic	0.00%	5	5	0	10.00%	10	10	1	7.69%	13	13	1	25.00%	4	4	1	9.38
Gratiot	0.00%	1	1	0	0.00%	3	3	0	0.00%	0	0	0	0.00%	2	2	0	0.00
Hiawatha	0.00%	12	12	0	14.29%	7	7	1	0.00%	5	5	0	0.00%	5	5	0	3.45
Huron	14.29%	7	7	1	0.00%	4	4	0	0.00%	4	4	0	0.00%	1	1	0	6.25
Ionia	0.00%	2	2	0	0.00%	3	3	0	0.00%	0	0	0	0.00%	1	1	0	0.00
Kalamazoo	0.00%	15	14	0	6.67%	17	15	1	5.26%	21	19	1	28.57%	9	7	2	7.27
Kent	5.41%	37	37	2	4.08%	51	49	2	5.88%	35	34	2	12.50%	18	16	2	5.88
Lapeer	0.00%	3	3	0	25.00%	4	4	1	0.00%	3	3	0	33.33%	4	3	1	15.38
Lenawee	0.00%	2	3	0	0.00%	0	0	0	0.00%	1	0	0	0.00%	2	2	0	0.00
Lifeways	7.69%	16	13	1	0.00%	22	22	0	0.00%	24	24	0	12.00%	25	25	3	4.76
Livingston	0.00%	7	7	0	0.00%	0	0	0	0.00%	2	2	0	0.00%	0	0	0	0.00
Macomb	6.78%	59	59	4	12.50%	91	88	11	8.60%	100	93	8	6.45%	63	62	4	8.94
Manistee-Benzle	0.00%	6	6	0	16.67%	7	6	1	0.00%	2	2	0	50.00%	2	2	1	12.50
Monroe	0.00%	2	2	0	0.00%	0	0	0	20.00%	5	5	1	0.00%	0	0	0	14.29
Montcalm	0.00%	7	7	0	0.00%	7	7	0	0.00%	4	4	0	0.00%	1	1	0	0.00
Muskegon	12.50%	16	16	2	0.00%	4	3	0	12.50%	9	8	1	0.00%	8	8	0	8.57
Newaygo	20.00%	5	5	1	0.00%	6	6	0	0.00%	6	4	0	0.00%	8	6	0	4.76
Northern Lakes	0.00%	11	11	0	6.67%	15	15	1	0.00%	14	14	0	21.05%	21	19	4	8.47
Northeast	0.00%	4	3	0	0.00%	7	7	0	0.00%	2	2	0	0.00%	2	1	0	0.00
North Country	0.00%	12	11	0	0.00%	16	15	0	0.00%	13	13	0	0.00%	7	6	0	0.00
Northpointe	0.00%	13	12	0	6.67%	15	15	1	0.00%	18	17	0	11.11%	9	9	1	3.77
Oakland	11.90%	43	42	5	8.11%	39	37	3	14.29%	45	42	6	18.92%	40	37	7	13.29
Ottawa	0.00%	2	2	0	16.67%	6	6	1	0.00%	2	2	0	0.00%	3	3	0	7.69
Pathways	16.67%	18	18	3	14.29%	14	14	2	0.00%	11	11	0	12.50%	8	8	1	11.76
Pines	-	0	0	0	0.00%	1	1	0	0.00%	3	3	0	0.00%	4	4	0	0.00
Saginaw	7.14%	43	42	3	4.35%	25	23	1	0.00%	23	19	0	0.00%	26	26	0	3.64
Sanilac	-	0	0	0	0.00%	3	2	0	0.00%	0	0	0	0.00%	1	1	0	0.00
Shiawassee	0.00%	5	5	0	0.00%	4	2	0	0.00%	2	1	0	12.50%	8	8	1	6.25
St. Clair	0.00%	11	9	0	5.56%	18	18	1	0.00%	7	7	0	0.00%	4	4	0	2.63
St. Joseph	-	1	0	0	14.29%	8	7	1	0.00%	6	5	0	0.00%	7	7	0	5.26
Summit Pointe	0.00%	1	1	0	0.00%	11	11	0	0.00%	8	8	0	16.67%	6	6	1	3.85
Tuscola	0.00%	4	4	0	0.00%	2	2	0	0.00%	5	5	0	0.00%	0	0	0	0.00
Van Buren	20.00%	5	5	1	0.00%	3	3	0	0.00%	3	3	0	0.00%	1	1	0	8.33
Washtenaw	16.67%	9	6	1	16.67%	14	12	2	20.00%	16	15	3	0.00%	0	0	0	18.18
West Michigan	0.00%	4	4	0	33.33%	4	3	1	0.00%	7	7	0	20.00%	7	5	1	10.53
Woodlands	0.00%	4	4	0	0.00%	7	7	0	20.00%	5	5	1	0.00%	15	15	0	3.23
	6.57%	734	685	45	7.60%	796	697	53	7.46%	800	737	55	11.00%	619	582	64	

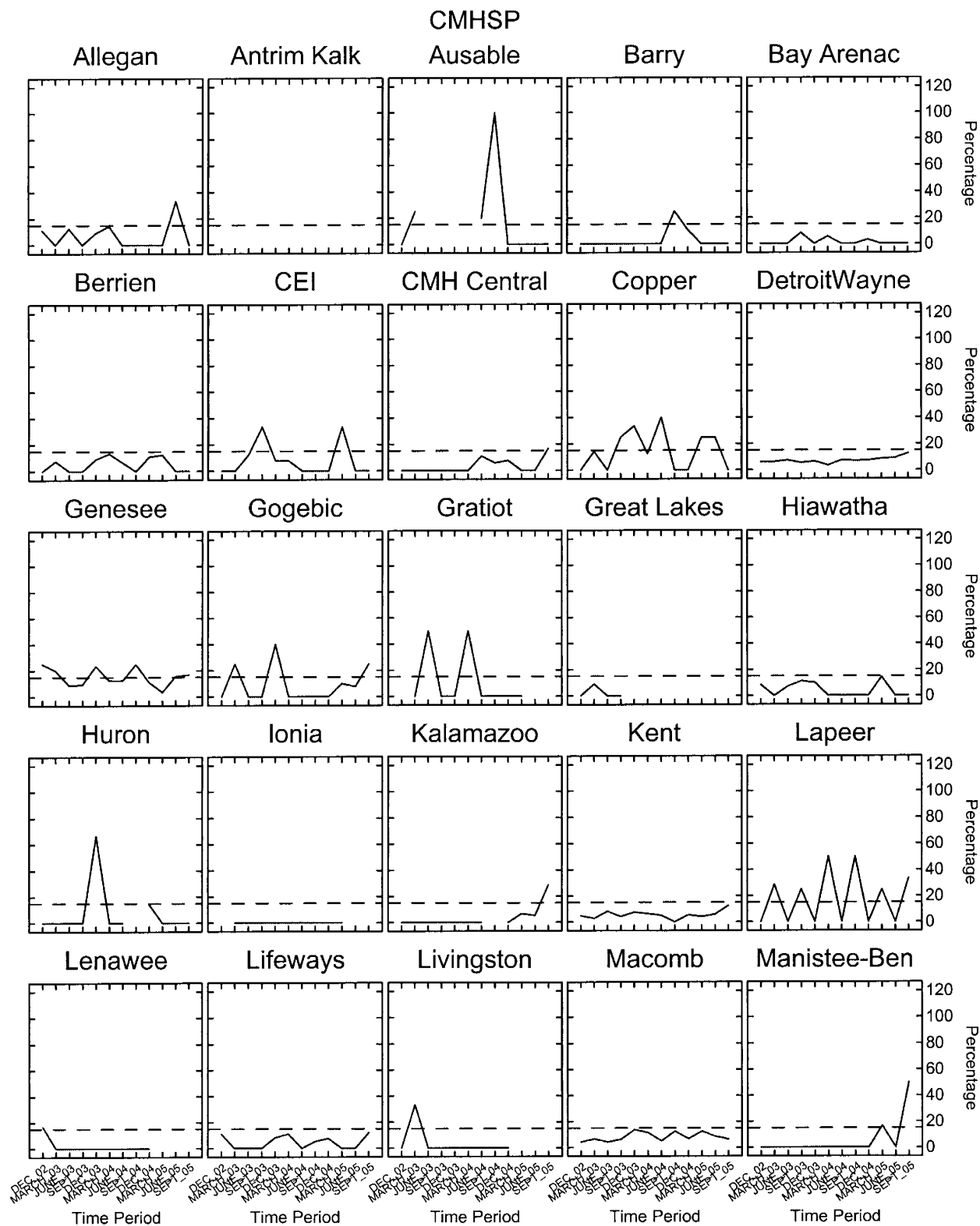
# Percentage of Readmissions to Inpatient Psychiatric Units Within 30 Days of Discharge from a Psychiatric Inpatient Unit for SED Children



Scatterplot 5a: Readmissions w/in 30 Days of Discharge  
(SED Children)

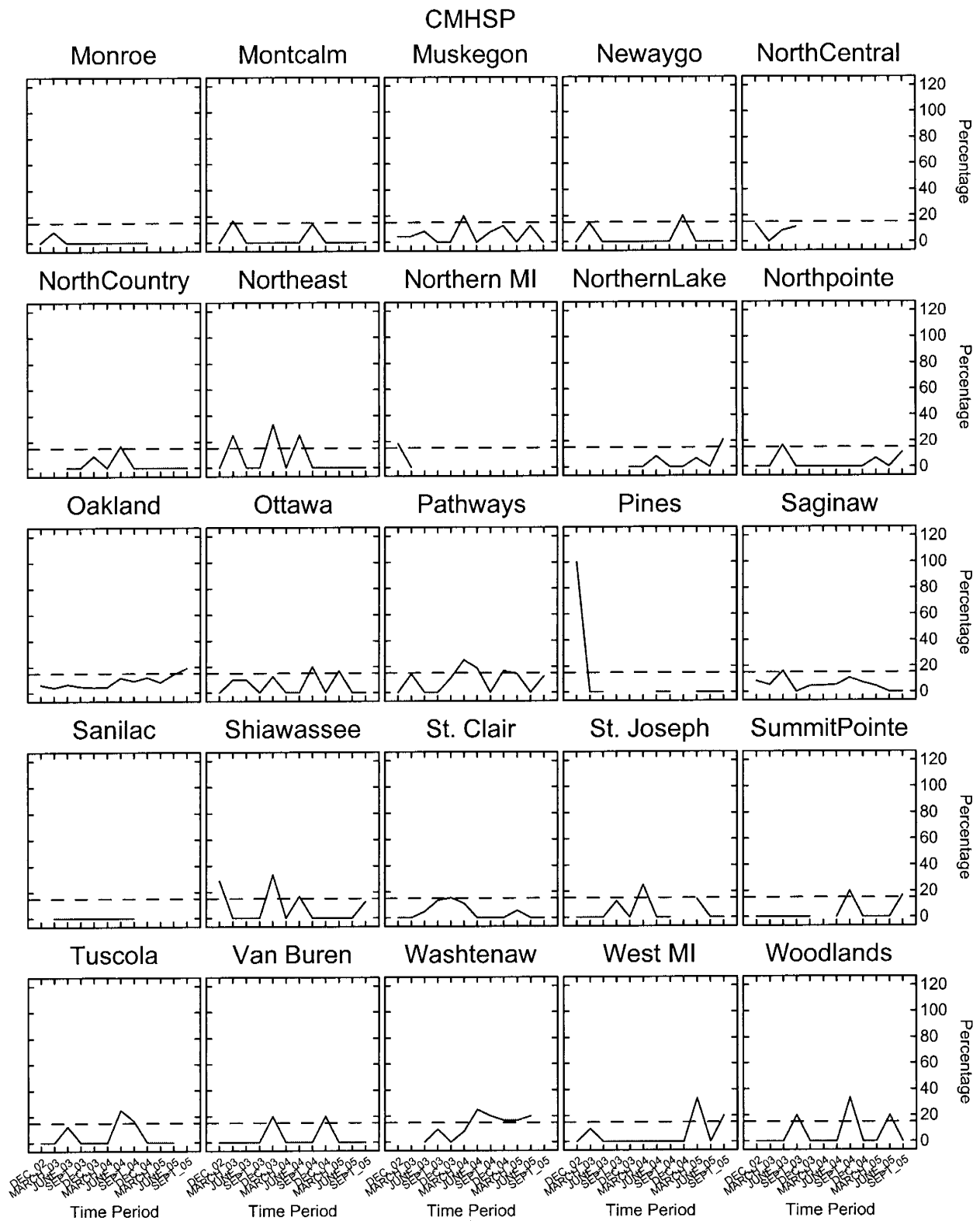


# Indic. 5a- % Readmissions Within 30 Days of Discharge (SED Children)





## Indicator No. 5a - Page Two



*Indicator 5b. Quality of Life: Adverse Consumer Outcomes -- The percentage of all other persons readmitted to an inpatient psychiatric unit within 30 days of discharge from a psychiatric inpatient unit. Fifteen percent or fewer readmissions within 30 days is the standard.*

**Rationale for Use:**

For some persons with serious mental illness, the occasional use of psychiatric inpatient care is essential. However, a rapid readmission following discharge may suggest that persons were prematurely discharged or that the post discharge follow-up was not timely or sufficient. This indicator assesses whether CMHSPs are meeting the department's standard of no more than 15 percent of persons discharged from inpatient units being readmitted within 30 days.

**Method of Calculation:**

- **Numerator:** The number of persons readmitted to an inpatient psychiatric unit within 30 days of discharge.
- **Denominator:** The total number of persons discharged from inpatient psychiatric units during the reporting period.

Note: Starting with the reporting period covering October 1, 2002 to December 31, 2002, this indicator has been separated out into two separate indicators. Indicator number 5a covers SED children and Indicator 5b covers all other persons.

**Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	46	46	46	46
Minimum	0.000	0.000	0.000	0.000
Maximum	14.290	28.570	17.650	22.220
Median	6.265	8.605	8.495	9.290
Mean	6.264	8.965	7.618	9.040

**Comments:**

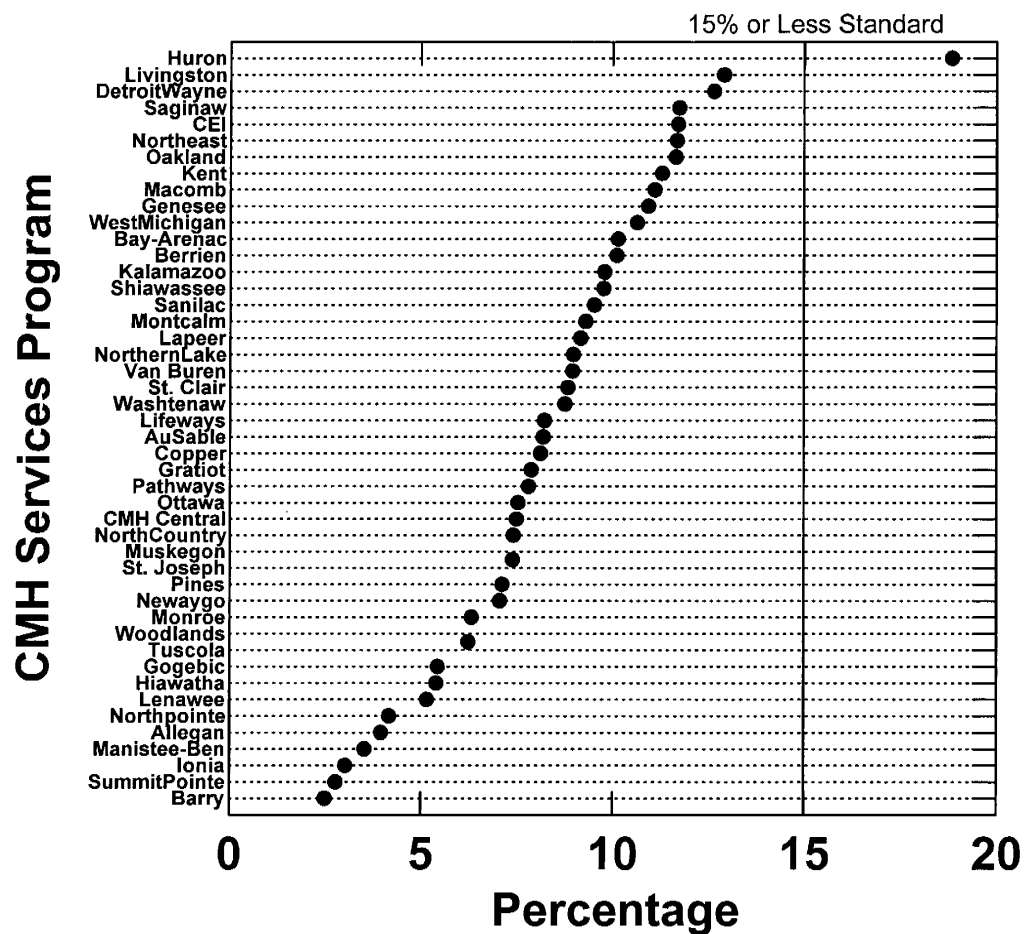
**Historical trends:** This indicator has been in place since FY '02. The trend line (lowess smooth line) of the longitudinal scatter plot shows a weak increase toward the 15 percent standard for FY'05 as compared to FY'04. The trend line is around 6 percent, however, and is clearly below the 15 percent standard. The scatterplot also shows that there has been very little variation or spread among the CMHSPs since FY '02.

**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, only Huron (18.84%) CMHSPs did not meet the 15 percent standard.

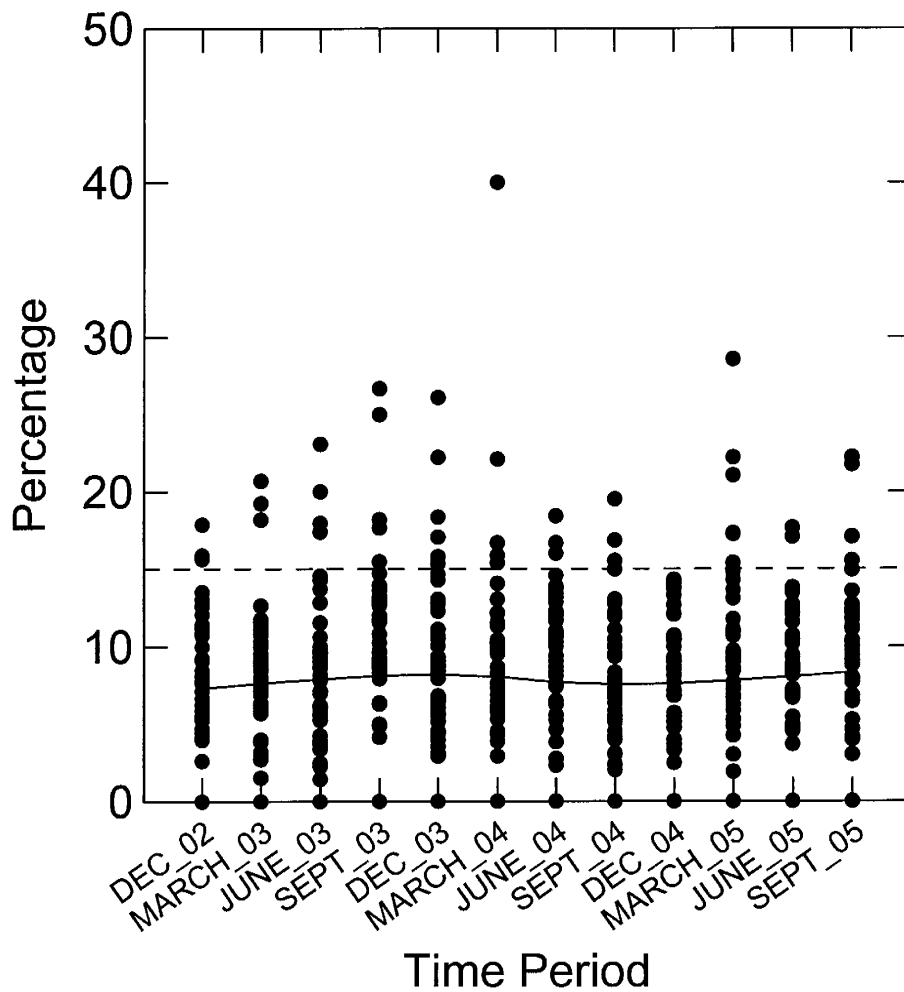
Indicator 5b: Percentage of Readmissions to Inpatient Psychiatric Units Within 30 Days of Discharge from a Psychiatric Inpatient Unit for All Other Persons

	October - December 2004				January - March 2005				April - June 2005				July - September 2005				Fiscal Year Percentage
	Percentage Q1	# All Other Persons Screened and Admitted for Care Q1	# of All Other Persons Discharged from Care Q1	# All Other Persons Discharged that were Readmitted Within 30 Days Q1	Percentage Q2	# All Other Persons Screened and Admitted for Care Q2	# of All Other Persons Discharged from Care Q2	# All Other Persons Discharged that were Readmitted Within 30 Days Q2	Percentage Q3	# All Other Persons Screened and Admitted for Care Q3	# of All Other Persons Discharged from Care Q3	# All Other Persons Discharged that were Readmitted Within 30 Days Q3	Percentage Q4	# All Other Persons Screened and Admitted for Care Q4	# of All Other Persons Discharged from Care Q4	# SED Children Discharged that were Readmitted Within 30 Days Q4	
Allegan	0.00%	21	21	0	0.00%	35	27	0	5.00%	23	20	1	9.09%	37	33	3	3.96
AuSable	5.71%	35	35	2	6.90%	36	29	2	10.71%	34	28	3	10.00%	33	30	3	8.20
Barry	0.00%	5	5	0	3.03%	33	33	1	0.00%	20	20	0	4.55%	22	22	1	2.50
Bay-Arenac	10.66%	131	122	13	14.29%	101	98	14	14.74%	111	95	14	1.83%	109	109	2	10.14
Berrien	12.07%	132	116	14	5.33%	80	75	4	8.16%	111	98	8	14.93%	71	67	10	10.11
CEI	13.74%	159	131	18	11.76%	71	68	8	13.46%	57	52	7	4.17%	48	48	2	11.71
CMH Central MI	2.50%	83	80	2	10.91%	99	55	6	5.45%	79	55	3	12.70%	63	63	8	7.51
Copper	0.00%	23	22	0	14.81%	27	27	4	9.30%	44	43	4	6.45%	34	31	2	8.13
Detroit-Wayne	12.09%	1,461	1,307	158	14.92%	1,633	1,381	206	11.56%	1,620	1,554	180	12.16%	1,606	1,587	193	12.64
Genesee	13.31%	359	263	35	10.69%	338	262	28	10.43%	316	230	24	9.16%	386	251	23	10.93
Gogebic	0.00%	11	11	0	0.00%	12	12	0	17.65%	17	17	3	0.00%	15	15	0	5.45
Gratiot	0.00%	6	6	0	9.09%	11	11	1	12.50%	8	8	1	7.69%	13	13	1	7.89
Hiawatha	5.17%	58	58	3	1.92%	52	52	1	3.70%	27	27	1	10.42%	49	48	5	5.41
Huron	14.29%	22	21	3	26.57%	24	21	6	17.65%	23	17	3	10.00%	10	10	1	18.84
Ionia	7.14%	30	28	2	0.00%	27	26	0	0.00%	23	20	0	4.00%	26	25	1	3.03
Kalamazoo	9.30%	56	43	4	13.10%	99	84	11	5.00%	115	100	5	13.56%	74	59	8	9.79
Kent	14.05%	268	242	34	8.96%	284	256	23	10.48%	277	248	26	11.81%	267	237	28	11.29
Lapeer	5.13%	39	39	2	13.64%	22	22	3	0.00%	25	25	0	21.74%	25	23	5	9.17
Lenawee	0.00%	34	34	0	5.88%	36	34	2	4.76%	48	42	2	8.89%	45	45	4	5.16
Lifeways	10.40%	186	125	13	4.88%	165	164	8	7.03%	129	128	9	11.27%	142	142	16	8.23
Livingston	10.71%	56	56	6	22.22%	21	9	2	10.20%	55	49	5	17.07%	48	41	7	12.90
Macomb	9.97%	416	391	39	9.73%	479	452	44	12.08%	400	356	43	12.35%	584	567	70	11.10
Manistee-Benzie	0.00%	20	20	0	6.67%	16	15	1	0.00%	25	25	0	8.00%	25	25	2	3.53
Monroe	6.82%	44	44	3	0.00%	8	10	0	6.82%	49	44	3	6.82%	44	44	3	6.34
Montcalm	7.69%	26	26	2	6.67%	45	45	3	13.79%	29	29	4	10.34%	29	29	3	9.30
Muskegon	8.51%	47	47	4	0.00%	42	41	0	17.07%	43	41	7	3.03%	36	33	1	7.41
Newaygo	3.70%	31	27	1	5.26%	20	19	1	13.79%	34	29	4	5.26%	39	38	2	7.08
Northern Lakes	8.15%	145	135	11	9.56%	149	136	13	9.45%	144	127	12	8.81%	172	159	14	8.98
Northeast	0.00%	33	33	0	17.24%	64	58	10	8.33%	54	48	4	15.52%	63	58	9	11.68
North Country	4.00%	84	75	3	8.70%	103	92	8	8.51%	100	94	8	7.87%	94	89	7	7.43
Northpointe	8.70%	48	46	4	4.26%	50	47	2	4.55%	44	44	2	0.00%	56	55	0	4.17
Oakland	12.68%	392	347	44	9.42%	374	329	31	12.70%	355	307	38	11.79%	410	390	46	11.65
Ottawa	5.13%	94	78	4	7.22%	103	97	7	8.89%	52	45	4	11.11%	49	45	5	7.55
Pathways	5.49%	91	91	5	8.51%	94	94	8	7.25%	69	69	5	9.40%	117	117	11	7.82
Pines	10.53%	19	19	2	7.41%	27	27	2	0.00%	20	20	0	11.11%	18	18	2	7.14
Saginaw	9.15%	344	328	30	17.31%	296	283	49	10.71%	286	280	30	10.24%	293	293	30	11.74
Sanilac	0.00%	9	7	0	0.00%	9	8	0	0.00%	9	9	0	22.22%	20	18	4	9.52
Shiawassee	0.00%	33	31	0	6.25%	36	32	2	8.82%	36	34	3	22.22%	39	36	8	9.77
St. Clair	10.45%	69	67	7	9.30%	43	43	4	12.20%	41	41	5	4.69%	64	64	3	8.84
St. Joseph	4.76%	21	21	1	14.29%	21	21	3	0.00%	20	19	0	10.00%	24	20	2	7.41
Summit Pointe	0.00%	38	38	0	0.00%	38	38	0	6.67%	30	30	2	5.26%	38	38	2	2.78
Tuscola	0.00%	10	8	0	21.05%	21	19	4	0.00%	19	19	0	0.00%	19	18	0	6.25
Van Buren	0.00%	16	14	0	15.38%	16	13	2	8.70%	23	23	2	11.76%	19	17	2	8.96
Washtenaw	9.03%	196	155	14	8.43%	219	178	15	8.48%	180	224	19	9.18%	250	196	18	8.76
West Michigan	13.79%	41	29	4	11.11%	44	36	4	8.57%	37	35	3	9.76%	50	41	4	10.64
Woodlands	3.33%	34	30	1	7.69%	13	13	1	10.71%	28	28	3	4.00%	29	25	1	6.25
	10.02%	5,476	4,872	488	11.12%	5,536	4,892	544	10.23%	5,288	4,896	501	10.73%	5,704	5,332	572	

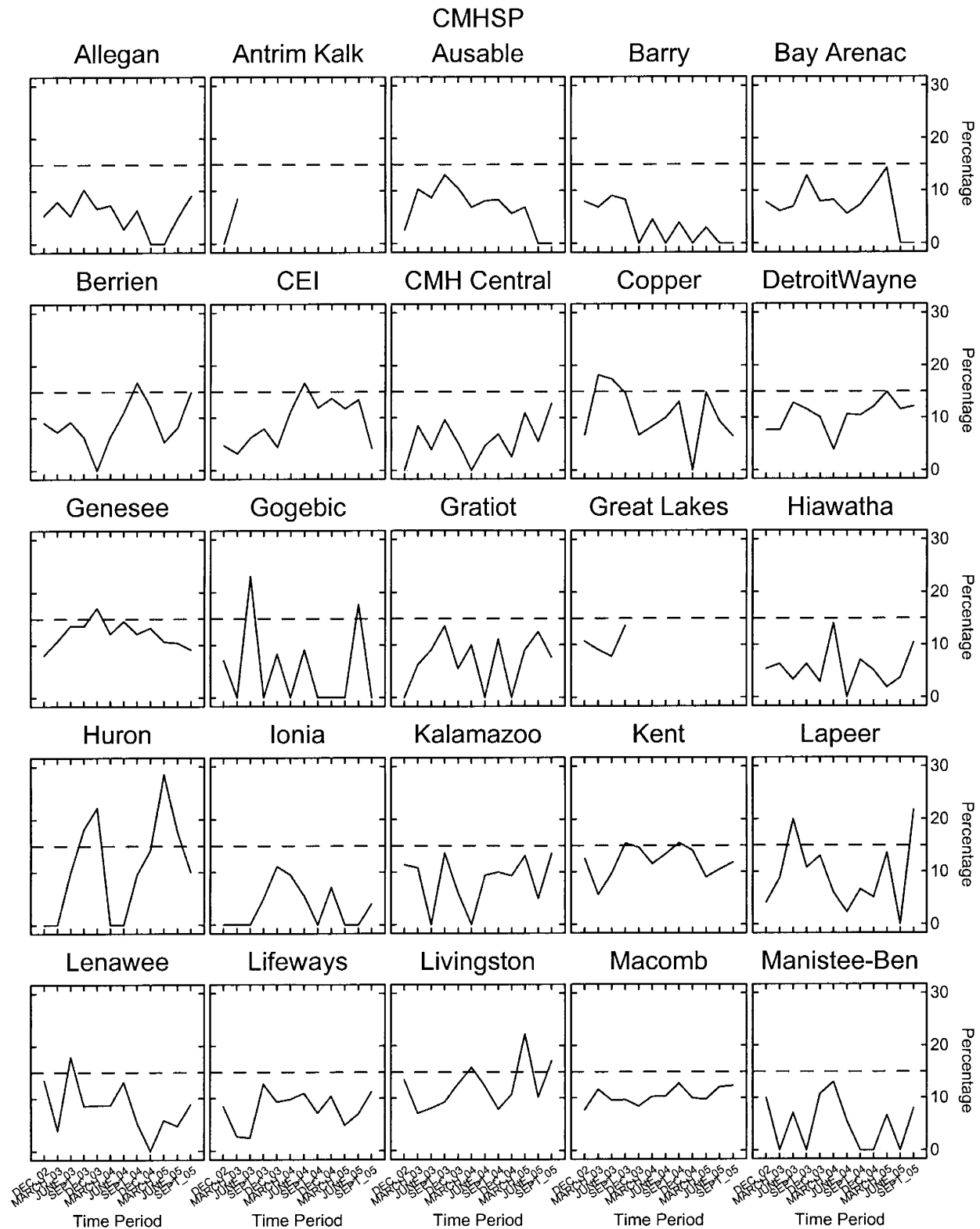
# Percentage of Readmissions to Inpatient Psychiatric Units Within 30 Days of Discharge from a Psychiatric Inpatient Unit for All Other Persons



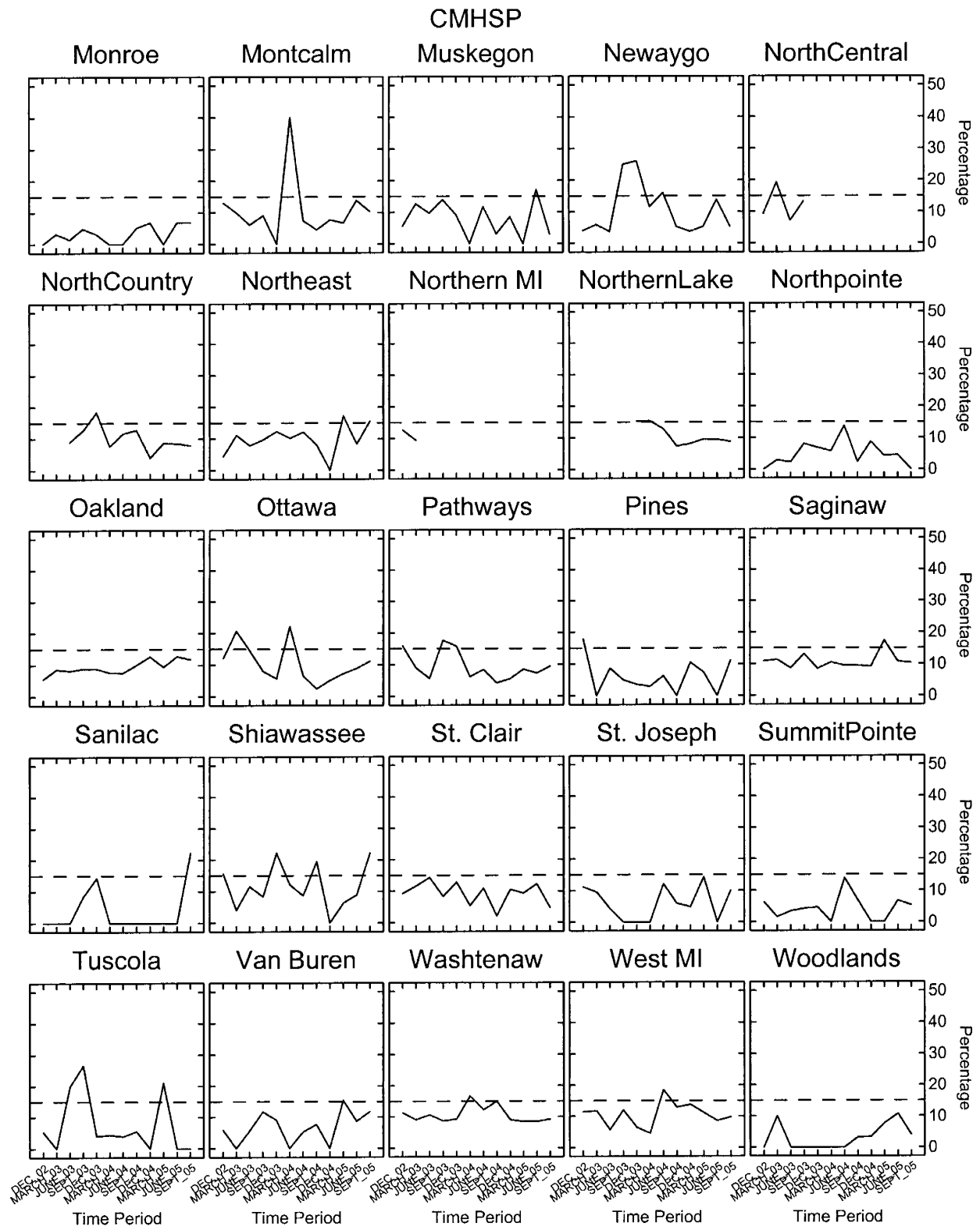
Scatterplot 5b: Readmissions w/in 30 Days of Discharge  
(All Other Persons)



# Indic. 5b- % Readmissions Within 30 Days of Discharge (All Other Persons)



# Indicator No. 5b - Page Two



*Indicator 8a. Access: Continuity of Care -- Percentage of children with SED discharged from a psychiatric inpatient unit who were seen for follow-up care within seven days.*

**Rationale for Use:**

When responsibility for the care of an individual shifts from one organization to another, it is important that services remain relatively uninterrupted and continuous. Otherwise, the quality of care and consumer outcomes may suffer.

Note 1: Starting with the reporting period covering October 1, 2001 to December 31, 2001, the time interval for the standard was changed from 30 days to seven days.

Note 2: Starting with the reporting period covering October 1, 2002 to December 31, 2002, this indicator has been separated out into two separate indicators. Indicator number 8a covers SED children and Indicator 8b covers all other persons.

**Data Definition:**

“Persons discharged” are those who were originally authorized by the CMHSP to be in a Psychiatric Inpatient Unit who met criteria for specialty mental health services and who had one of the following discharge diagnoses:

- Schizophrenia or other psychotic disorders (295.xx, 297.1, 297.3, 298.8, 298.9)
- Mood disorders, major depression, or bipolar disorders (296.xx)
- Dementia (290.xx)
- Panic disorder, phobias, or obsessive-compulsive disorder (300.xx)
- Antisocial personality disorder (301.7)

Federal Definition of SED:

The term “serious emotional disturbance” is used in a variety of Federal statutes in reference to children under the age of 18 with a diagnosable mental health problem that severely disrupts their ability to function socially, academically, and emotionally. The term does not signify any particular diagnosis; rather, it is a legal term that triggers a host of mandated services to meet the needs of these children.

**Method of Calculation:**

- **Numerator:** The number of children with SED discharged from an inpatient setting who were seen for follow-up care within seven days of discharge.
- **Denominator:** The total number of inpatient discharges for children with SED during the period. Persons who refuse an appointment offered in the 7-day period may be excluded from the count.

**Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	40	43	43	39
Minimum	0.000	0.000	0.000	0.000
Maximum	100.000	100.000	100.000	100.000
Median	100.000	100.000	100.000	100.000
Mean	82.576	85.453	83.913	80.279



*Indicator 8a continued:*

**Comments:**

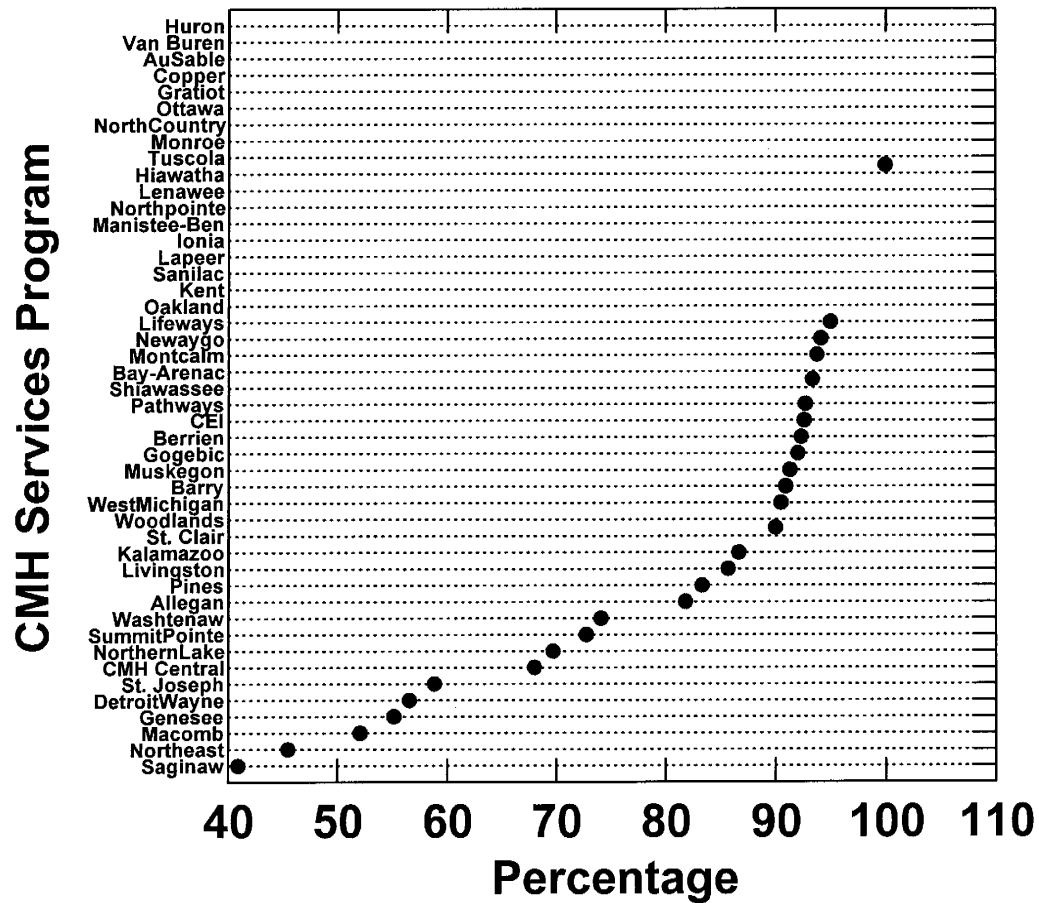
**Historical trends:** This indicator has been in place since FY '02. The trend line (lowess smooth line) of the longitudinal scatter plot shows a weak downward trend between FY04 and FY05. The scatterplot also shows that there has been some variation or spread among the CMHSPs since FY '02.

**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, many (40%) of the CMHSPs had 100 percent compliance with this indicator. Saginaw reported the lowest percentage at 40.91%. Northeast reported the second lowest percentage at 45.45%.

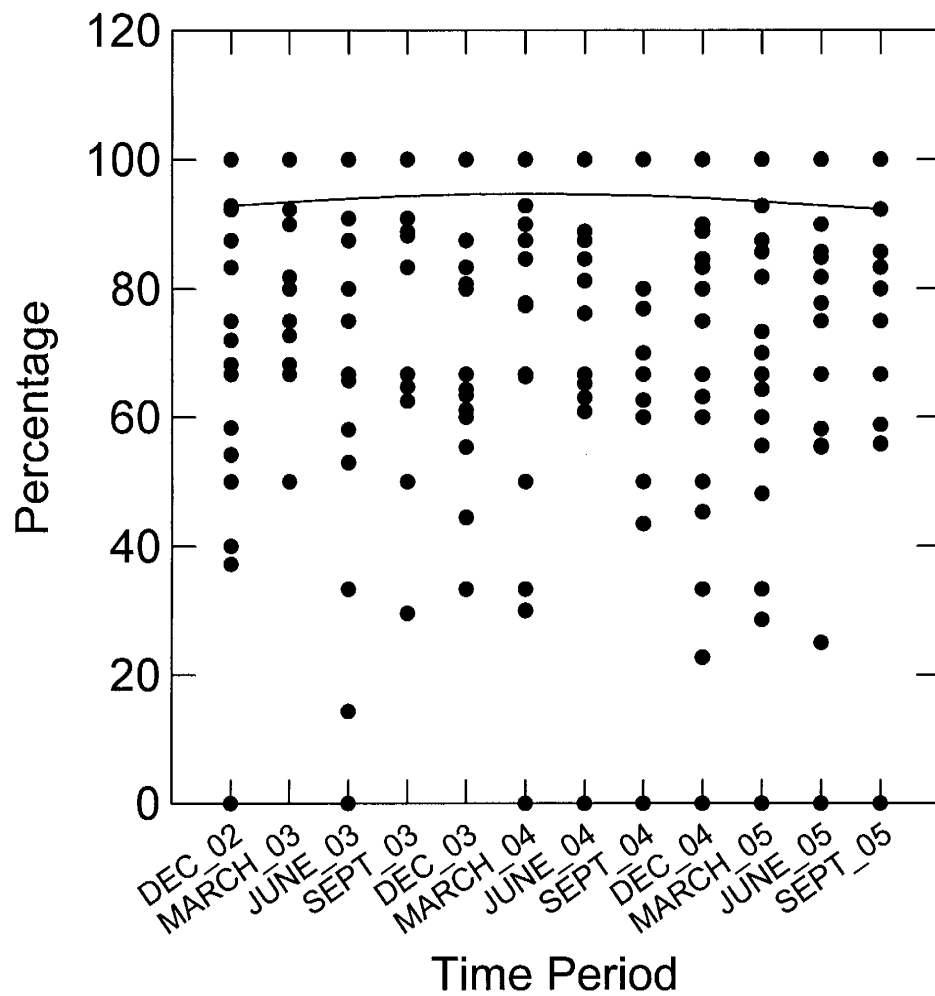
Indicator 8a: Percentage of SED Children Discharged from a Psychiatric Inpatient Unit Who are Seen for Follow-up Care Within 7 Days

	October - December 2004			January - March 2005			April - June 2005			July - September 2005			Fiscal Year Percentage
	Percentage Q1	# SED Children Discharged Q1	# SED Children Seen for Follow-up Care Q1	Percentage Q2	# SED Children Discharged Q2	# SED Children Seen for Follow-up Care Q2	Percentage Q3	# SED Children Discharged Q3	# SED Children Seen for Follow-up Care Q3	Percentage Q4	# SED Children Discharged Q4	# SED Children Seen for Follow-up Care Q4	
Allegan	50.00%	4	2	100.00%	1	1	100.00%	3	3	100.00%	3	3	81.82
AuSable	100.00%	4	4	100.00%	2	2	100.00%	4	4	100.00%	1	1	100.00
Barry	100.00%	3	3	0.00%	1	0	100.00%	5	5	100.00%	2	2	90.91
Bay-Arenac	100.00%	13	13	92.86%	14	13	81.82%	11	9	100.00%	7	7	93.33
Berrien	100.00%	4	4	100.00%	4	4	100.00%	1	1	75.00%	4	3	92.31
CEI	90.00%	10	9	100.00%	5	5	100.00%	5	5	85.71%	7	6	92.59
CMH Central MI	60.00%	5	3	60.00%	5	3	77.78%	9	7	66.67%	6	4	68.00
Copper	-	0	0	-	0	0	100.00%	4	4	-	0	0	100.00
Detroit-Wayne	45.30%	234	106	73.33%	150	110	58.17%	153	89	55.79%	190	106	56.53
Genesee	63.16%	19	12	48.15%	27	13	55.32%	47	26	55.88%	34	19	55.12
Gogebic	60.00%	5	3	100.00%	7	7	100.00%	10	10	100.00%	3	3	92.00
Gratiot	-	0	0	100.00%	1	1	-	0	0	100.00%	2	2	100.00
Hiawatha	100.00%	12	12	100.00%	7	7	100.00%	5	5	100.00%	5	5	100.00
Huron	100.00%	3	3	100.00%	2	2	100.00%	1	1	-	0	0	100.00
Ionia	100.00%	2	2	100.00%	2	2	-	0	0	100.00%	1	1	100.00
Kalamazoo	100.00%	5	5	87.50%	8	7	85.71%	7	6	80.00%	10	8	86.67
Kent	100.00%	11	11	100.00%	15	15	100.00%	12	12	100.00%	1	1	100.00
Lapeer	-	0	0	100.00%	3	3	-	0	0	100.00%	2	2	100.00
Lenawee	100.00%	2	2	-	0	0	100.00%	1	1	100.00%	2	2	100.00
Lifeways	100.00%	7	7	81.82%	11	9	100.00%	29	29	92.31%	13	12	95.00
Livingston	83.33%	6	5	-	0	5	100.00%	1	1	-	0	0	85.71
Macomb	22.73%	44	10	55.56%	27	15	84.85%	33	28	58.82%	17	10	52.07
Manistee-Benzie	100.00%	3	3	100.00%	3	3	100.00%	1	1	100.00%	1	1	100.00
Monroe	100.00%	2	2	100.00%	4	4	100.00%	3	3	-	0	0	100.00
Montcalm	100.00%	4	4	100.00%	7	7	100.00%	4	4	0.00%	1	0	93.75
Muskegon	88.89%	9	8	100.00%	2	2	85.71%	7	6	100.00%	5	5	91.30
Newaygo	100.00%	3	3	100.00%	5	5	66.67%	3	2	100.00%	6	6	94.12
Northern Lakes	75.00%	16	12	64.29%	14	9	55.56%	18	10	83.33%	18	15	69.70
Northeast	0.00%	2	0	33.33%	6	2	100.00%	2	2	100.00%	1	1	45.45
North Country	100.00%	6	6	100.00%	11	11	100.00%	14	14	100.00%	8	8	100.00
Northpointe	100.00%	5	5	100.00%	8	8	100.00%	9	9	100.00%	6	6	100.00
Oakland	100.00%	4	4	100.00%	20	20	100.00%	11	11	100.00%	19	19	100.00
Ottawa	100.00%	3	3	100.00%	6	6	100.00%	3	3	100.00%	3	3	100.00
Pathways	84.62%	13	11	100.00%	11	11	90.00%	10	9	100.00%	7	7	92.68
Pines	-	0	0	100.00%	1	1	100.00%	2	2	66.67%	3	2	83.33
Saginaw	33.33%	12	4	66.67%	3	2	25.00%	4	1	66.67%	3	2	40.91
Sanilac	-	0	0	100.00%	3	3	100.00%	1	1	-	0	0	100.00
Shiawassee	80.00%	5	4	100.00%	3	3	100.00%	1	1	100.00%	6	6	93.33
St. Clair	0.00%	1	0	100.00%	5	5	100.00%	2	2	100.00%	2	2	90.00
St. Joseph	100.00%	3	3	28.57%	7	2	66.67%	3	2	75.00%	4	3	58.82
Summit Pointe	-	0	0	60.00%	5	3	75.00%	4	3	100.00%	2	2	72.73
Tuscola	100.00%	3	3	100.00%	1	1	100.00%	2	2	-	0	0	100.00
Van Buren	100.00%	3	3	100.00%	3	3	100.00%	1	1	100.00%	1	1	100.00
Washtenaw	66.67%	6	4	70.00%	10	7	81.82%	11	9	-	0	0	74.07
West Michigan	100.00%	4	4	66.67%	3	2	100.00%	7	7	85.71%	7	6	90.48
Woodlands	100.00%	2	2	85.71%	7	6	100.00%	5	5	83.33%	6	5	90.00
	60.56%	502	304	79.55%	440	350	75.91%	469	356	70.88%	419	297	

# Percentage of SED Children Discharged from a Psychiatric Inpatient Unit Who are Seen for Follow-up Care Within 7 Days

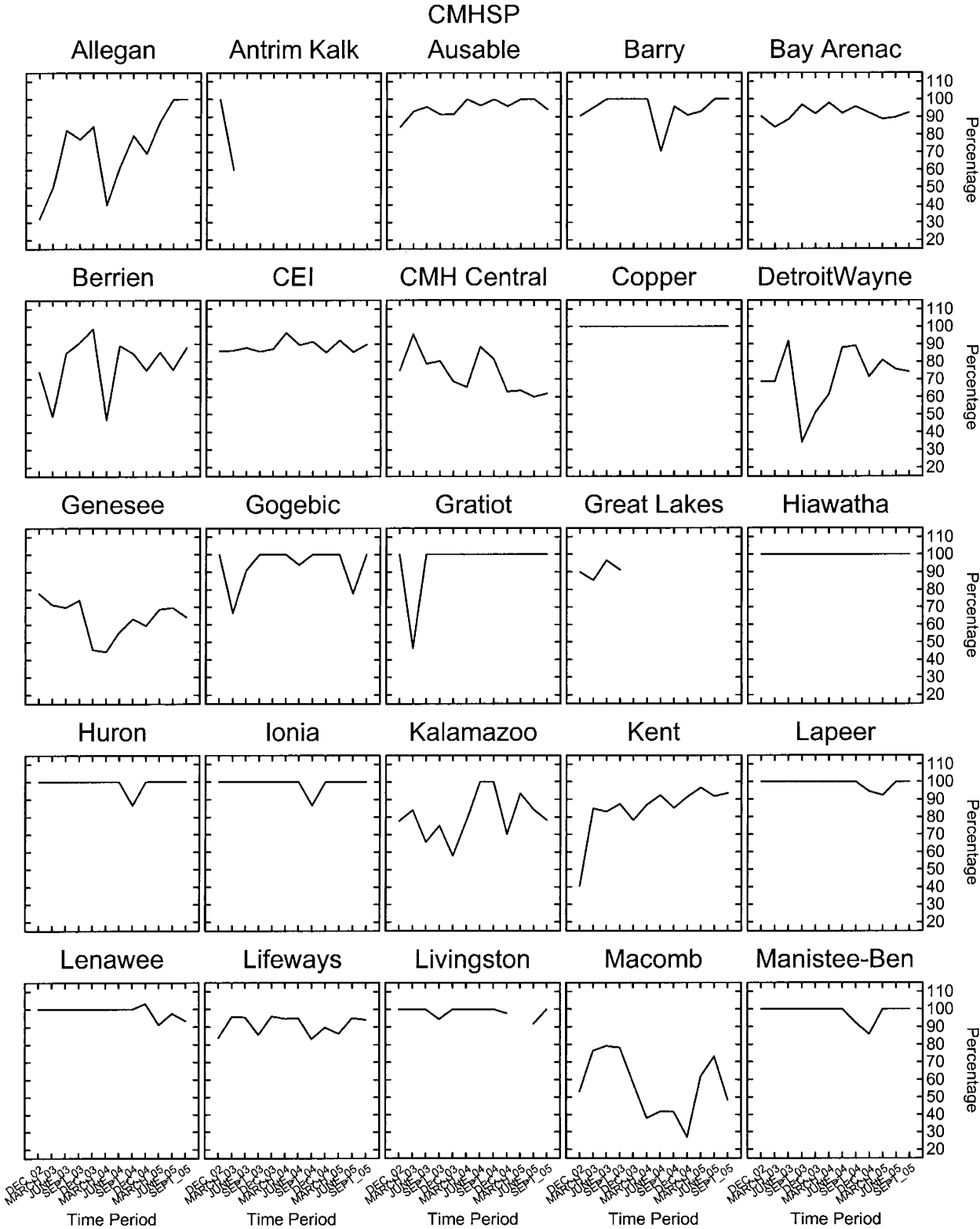


Scatterplot 8a: % Discharged Seen Within 7 Days  
(SED Children)

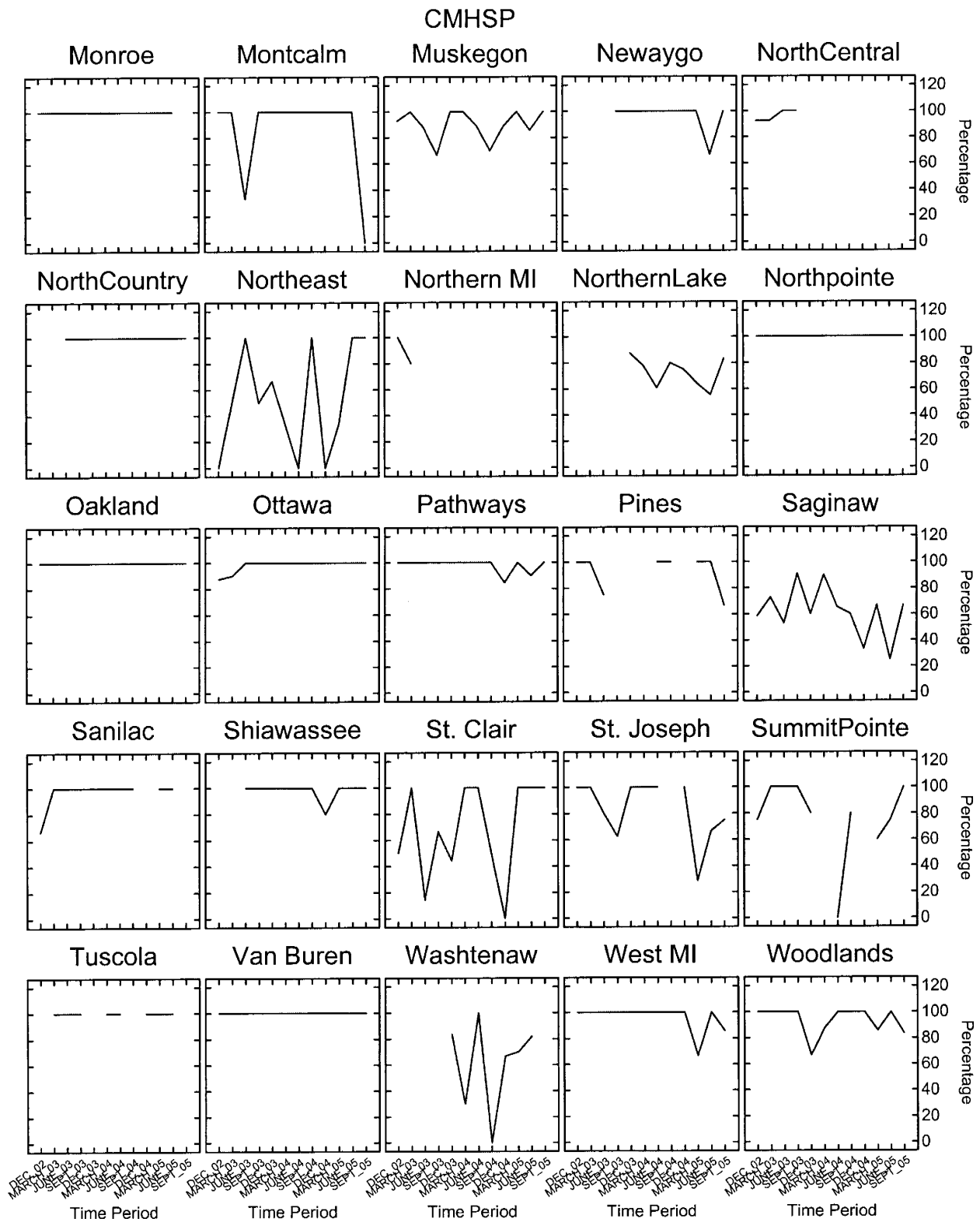


# Indicator No. 8b - % Discharged Seen Within 7 Days

(All Other Persons)



# Indicator No. 8a - Page Two



*Indicator 8b. Access: Continuity of Care -- Percentage of all other persons discharged from a psychiatric inpatient unit who were seen for follow-up care within seven days.*

**Rationale for Use:**

When responsibility for the care of an individual shifts from one organization to another, it is important that services remain relatively uninterrupted and continuous. Otherwise, the quality of care and consumer outcomes may suffer.

Note 1: Starting with the reporting period covering October 1, 2001 to December 31, 2001, the time interval for the standard was changed from 30 days to seven days.

Note 2: Starting with the reporting period covering October 1, 2002 to December 31, 2002, this indicator has been separated out into two separate indicators. Indicator number 8a covers SED children and Indicator 8b covers all other persons.

**Data Definition:**

“Persons discharged” are those who were originally authorized by the CMHSP to be in a Psychiatric Inpatient Unit who met criteria for specialty mental health services and who had one of the following discharge diagnoses:

- X Schizophrenia or other psychotic disorders (295.xx, 297.1, 297.3, 298.8, 298.9)
- X Mood disorders, major depression, or bipolar disorders (296.xx)
- X Dementia (290.xx)
- X Panic disorder, phobias, or obsessive-compulsive disorder (300.xx)
- X Antisocial personality disorder (301.7)

**Method of Calculation:**

- **Numerator:** The number of persons discharged from an inpatient setting who were seen for follow-up care within seven days of discharge.
- **Denominator:** The total number of inpatient discharges during the period. Persons who refuse an appointment offered in the 7-day period may be excluded from the count.

**Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	46	45	46	46
Minimum	27.090	61.680	0.000	0.000
Maximum	103.230	100.000	100.000	100.000
Median	95.370	93.440	95.825	97.065
Mean	88.776	91.165	84.832	86.621

**Comments:**

**Historical trends:** This indicator has been in place since FY '02. The trend line (lowest smooth line) of the longitudinal scatter plot shows a relatively static trend between 90-95 percent. The scatterplot also shows that there has been some variation or spread among the CMHSPs since FY '02.

*Indicator 8b continued:*

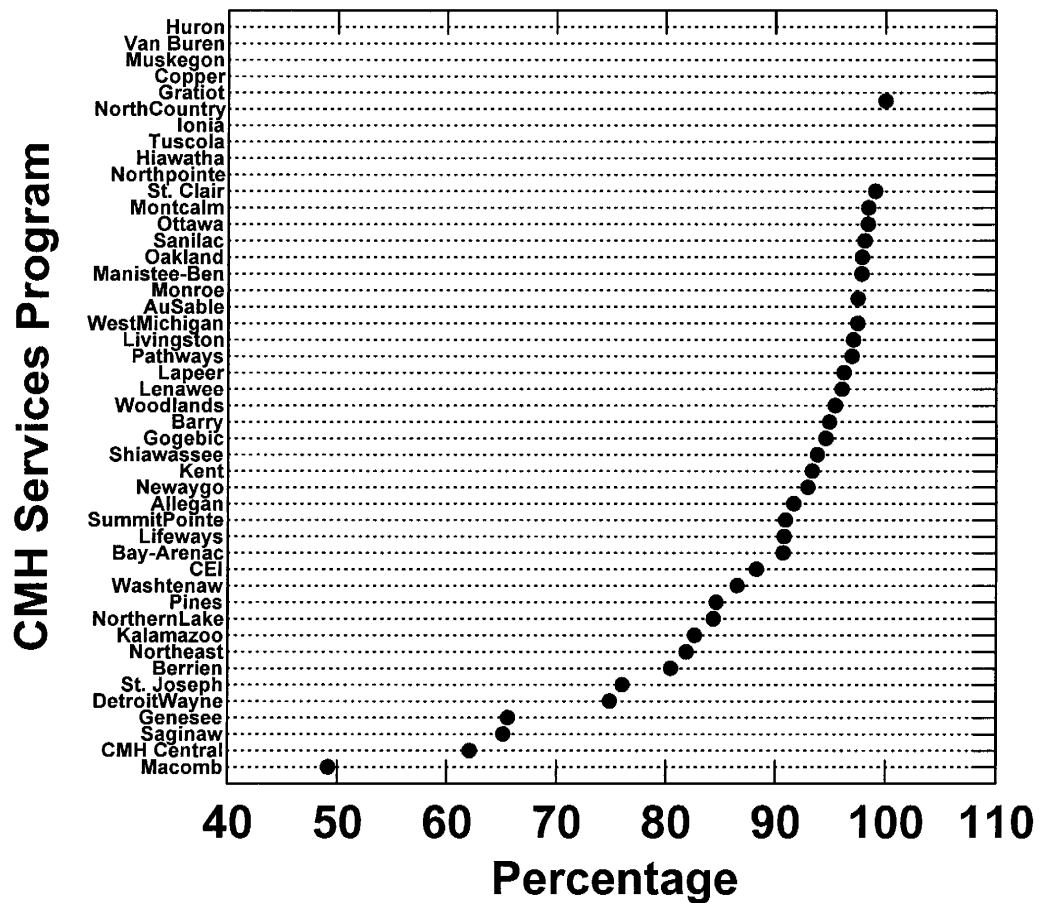
**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, while a few CMHSPs had 100 percent compliance with this indicator, there was a range of percentages down to 49.18 percent. The four lowest CMHSPs on this indicator were Genesee (65.55%), Saginaw (65.13%), CMH Central (62.11%), and Macomb (49.18%)



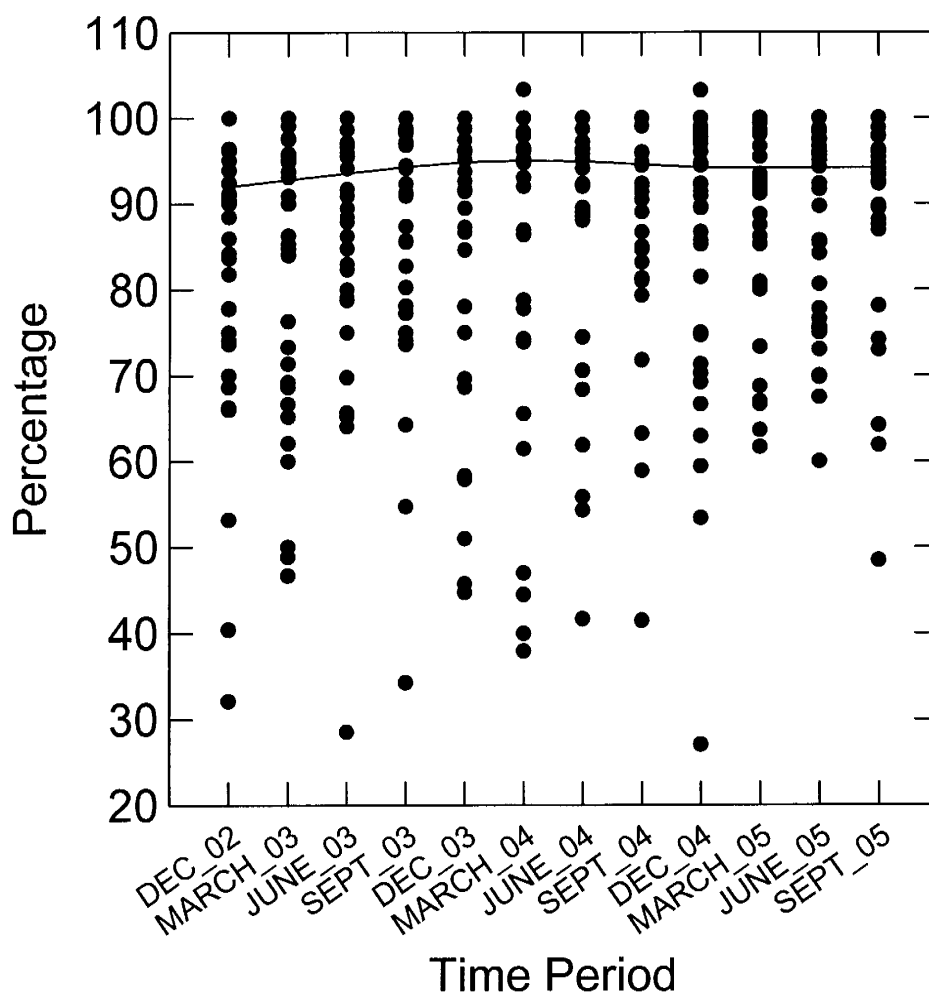
Indicator 8b: Percentage of All Other Persons Discharged from a Psychiatric Inpatient Unit Who are Seen for Follow-up Care Within 7 Days

	October - December 2004			January - March 2005			April - June 2005			July - September 2005			Fiscal Year Percentage
	Percentage Q1	# All Other Persons Discharged Q1	# All Other Persons Seen for Follow-up Care Q1	Percentage Q2	# All Other Persons Discharged Q2	# All Other Persons Seen for Follow-up Care Q2	Percentage Q3	# All Other Persons Discharged Q3	# All Other Persons Seen for Follow-up Care Q3	Percentage Q4	# All Other Persons Discharged Q4	# All Other Persons Seen for Follow-up Care Q4	
Allegan	69.23%	13	9	87.50%	16	14	100.00%	20	20	100.00%	23	23	91.67
AuSable	96.00%	25	24	100.00%	19	19	100.00%	19	19	94.12%	17	16	97.50
Barry	90.91%	11	10	93.10%	29	27	100.00%	9	9	100.00%	10	10	94.92
Bay-Arenac	92.19%	64	59	88.73%	71	63	89.71%	68	61	92.42%	66	61	90.71
Berrien	75.00%	76	57	85.25%	61	52	75.38%	65	49	88.14%	59	52	80.46
CEI	85.25%	61	52	92.19%	64	59	85.42%	48	41	89.80%	49	44	88.29
CMH Central MI	62.96%	54	34	63.64%	55	35	60.00%	55	33	61.90%	63	39	62.11
Copper	100.00%	7	7	100.00%	13	13	100.00%	24	24	100.00%	19	19	100.00
Detroit-Wayne	71.31%	1,457	1,039	80.89%	853	690	75.68%	1,291	977	74.20%	1,182	877	74.91
Genesee	59.43%	175	104	68.75%	160	110	69.82%	169	118	64.23%	123	79	65.55
Gogebic	100.00%	8	8	100.00%	10	10	77.78%	9	7	100.00%	10	10	94.59
Gratiot	100.00%	4	4	100.00%	4	4	100.00%	2	2	100.00%	13	13	100.00
Hiawatha	100.00%	58	58	100.00%	52	52	100.00%	27	27	100.00%	30	30	100.00
Huron	100.00%	13	13	100.00%	20	20	100.00%	11	11	100.00%	6	6	100.00
Ionia	100.00%	32	32	100.00%	21	21	100.00%	16	16	100.00%	17	17	100.00
Kalamazoo	70.27%	37	26	93.44%	61	57	84.21%	57	48	78.13%	64	50	82.65
Kent	91.38%	116	106	96.67%	120	116	91.67%	108	99	93.46%	107	100	93.35
Lapeer	94.44%	18	17	92.31%	13	12	100.00%	9	9	100.00%	13	13	96.23
Lenawee	103.23%	31	32	91.18%	34	31	97.62%	42	41	93.33%	45	42	96.05
Lifeways	89.66%	87	78	86.18%	123	106	95.06%	81	77	94.00%	100	94	90.79
Livingston	97.73%	44	43	-	0	3	91.67%	24	22	100.00%	35	35	97.09
Macomb	27.09%	251	68	61.68%	167	103	73.03%	152	111	48.46%	227	110	49.18
Manistee-Benzie	85.71%	7	6	100.00%	6	6	100.00%	16	16	100.00%	17	17	97.83
Monroe	100.00%	43	43	100.00%	28	28	96.67%	30	29	89.47%	19	17	97.50
Montcalm	92.31%	26	24	100.00%	45	45	100.00%	29	29	100.00%	29	29	98.45
Muskegon	100.00%	32	32	100.00%	26	26	100.00%	30	30	100.00%	19	19	100.00
Newaygo	94.74%	19	18	100.00%	14	14	85.71%	28	24	100.00%	10	10	92.96
Northern Lakes	81.48%	135	110	91.60%	131	120	76.61%	124	95	86.93%	153	133	84.35
Northeast	89.47%	19	17	80.49%	41	33	67.50%	40	27	94.74%	38	36	81.88
North Country	100.00%	35	35	100.00%	41	41	100.00%	51	51	100.00%	52	52	100.00
Northpointe	100.00%	23	23	100.00%	17	17	100.00%	24	24	100.00%	29	29	100.00
Oakland	98.32%	238	234	99.40%	333	331	97.45%	196	191	95.43%	219	209	97.87
Ottawa	98.99%	99	98	98.06%	103	101	98.36%	61	60	97.96%	49	48	98.40
Pathways	96.97%	66	64	98.55%	69	68	95.65%	46	44	96.30%	81	78	96.95
Pines	100.00%	11	11	80.00%	25	20	75.00%	16	12	92.31%	13	12	84.62
Saginaw	53.38%	133	71	67.02%	94	63	70.00%	80	56	73.02%	126	92	65.13
Sanilac	100.00%	12	12	92.31%	13	12	100.00%	11	11	100.00%	17	17	98.11
Shiawassee	86.67%	30	26	92.86%	28	26	96.00%	25	24	100.00%	30	30	93.81
St. Clair	100.00%	35	35	95.45%	22	21	100.00%	22	22	100.00%	30	30	99.08
St. Joseph	66.67%	18	12	66.67%	24	16	92.31%	13	12	87.50%	16	14	76.06
Summit Pointe	100.00%	24	24	92.86%	28	26	80.65%	31	25	92.59%	27	25	90.91
Tuscola	100.00%	4	4	100.00%	12	12	100.00%	14	14	100.00%	9	9	100.00
Van Buren	100.00%	9	9	100.00%	13	13	100.00%	10	10	100.00%	8	8	100.00
Washtenaw	74.71%	87	65	73.33%	75	55	98.72%	78	77	98.85%	87	86	86.54
West Michigan	97.30%	37	36	100.00%	40	40	94.29%	35	33	97.83%	46	45	97.47
Woodlands	90.91%	22	20	92.31%	13	12	100.00%	28	28	96.00%	25	24	95.45
	76.43%	3,806	2,909	86.16%	3,207	2,763	82.69%	3,344	2,765	81.97%	3,427	2,809	

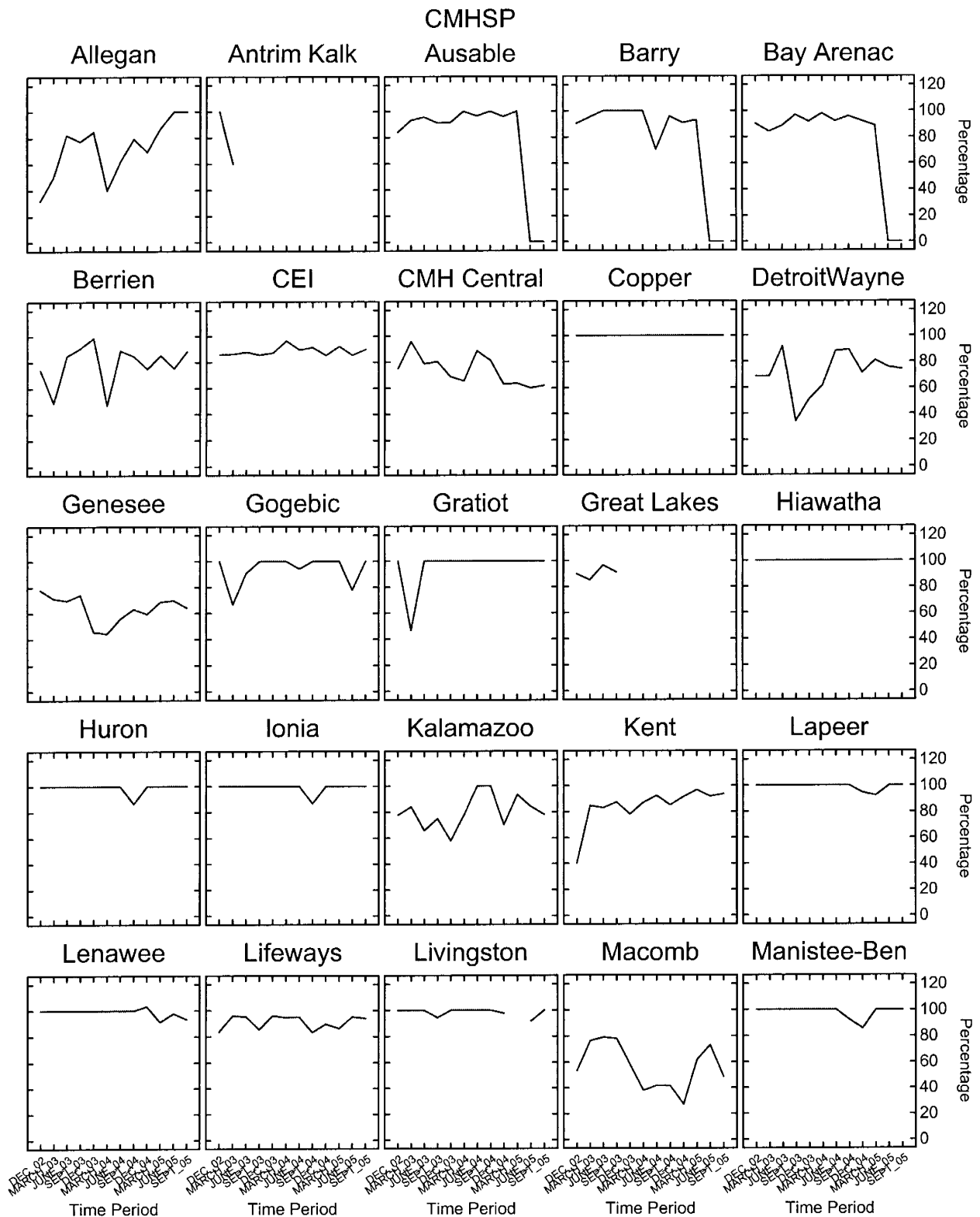
Percentage of All Other Person Discharged from a Psychiatric Inpatient Unit Who are Seen for Follow-up Care Within 7 Days



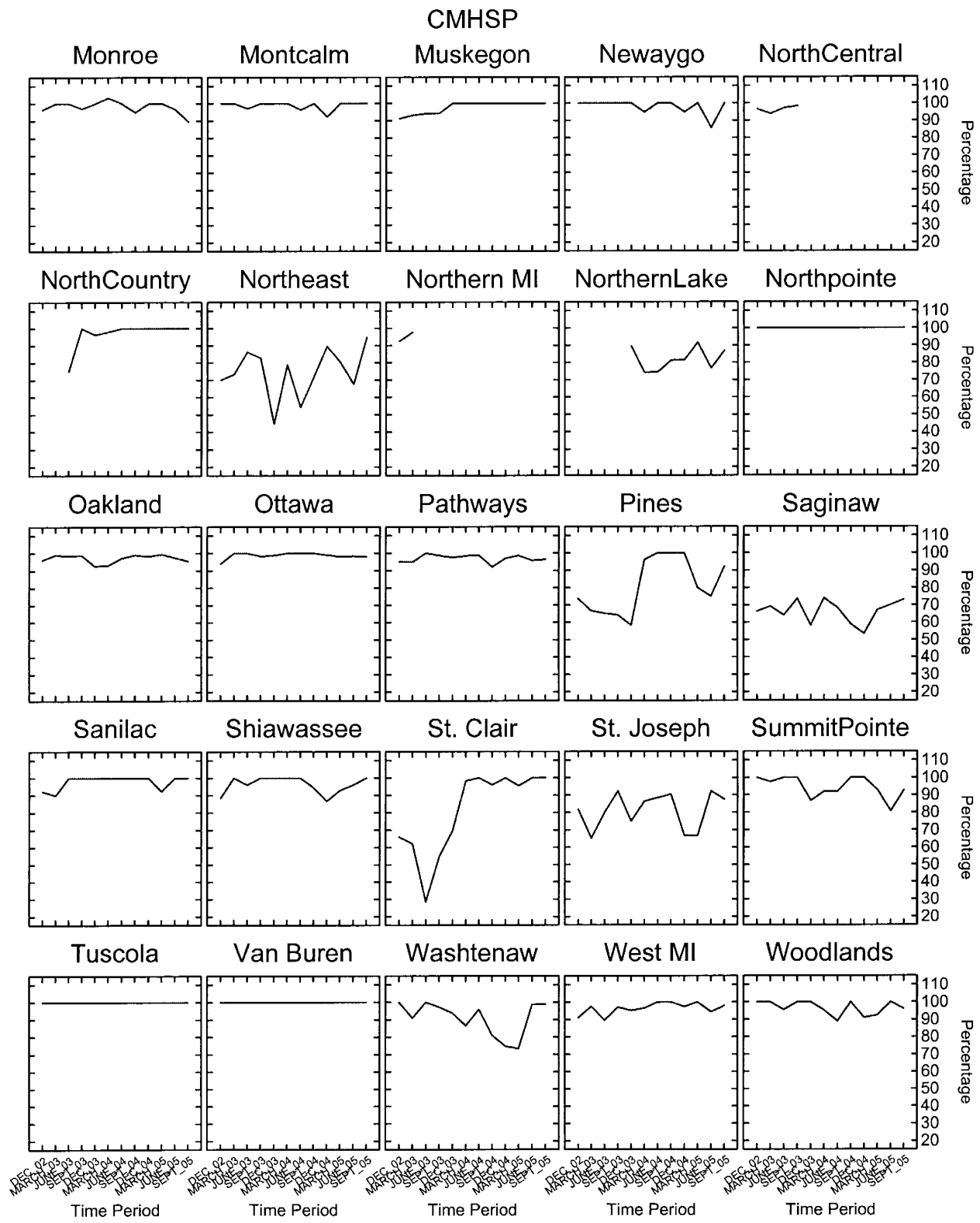
Scatterplot 8b: % Discharged Seen Within 7 Days  
(All Other Persons)



# Indicator No. 8b - % Discharged Seen Within 7 Days (All Other Persons)



# Indicator No. 8b - Page Two



*Indicator 22. Access: Penetration Rate -- Percentage of Area Medicaid Recipients Receiving CMHSP Managed Services. –*

**Rationale for Use:**

This indicator reflects the extent to which area Medicaid recipients have accessed managed public mental health services.

**Method of Calculation:**

- **Numerator:** The number of area Medicaid recipients receiving CMHSP managed services during the reporting period.
- **Denominator:** The unduplicated count of Medicaid eligible recipients in the catchment area as determined by the Michigan Family Independence Agency (FIA) and supplied to MDCH by the Data Exchange Gateway.

**Comments:**

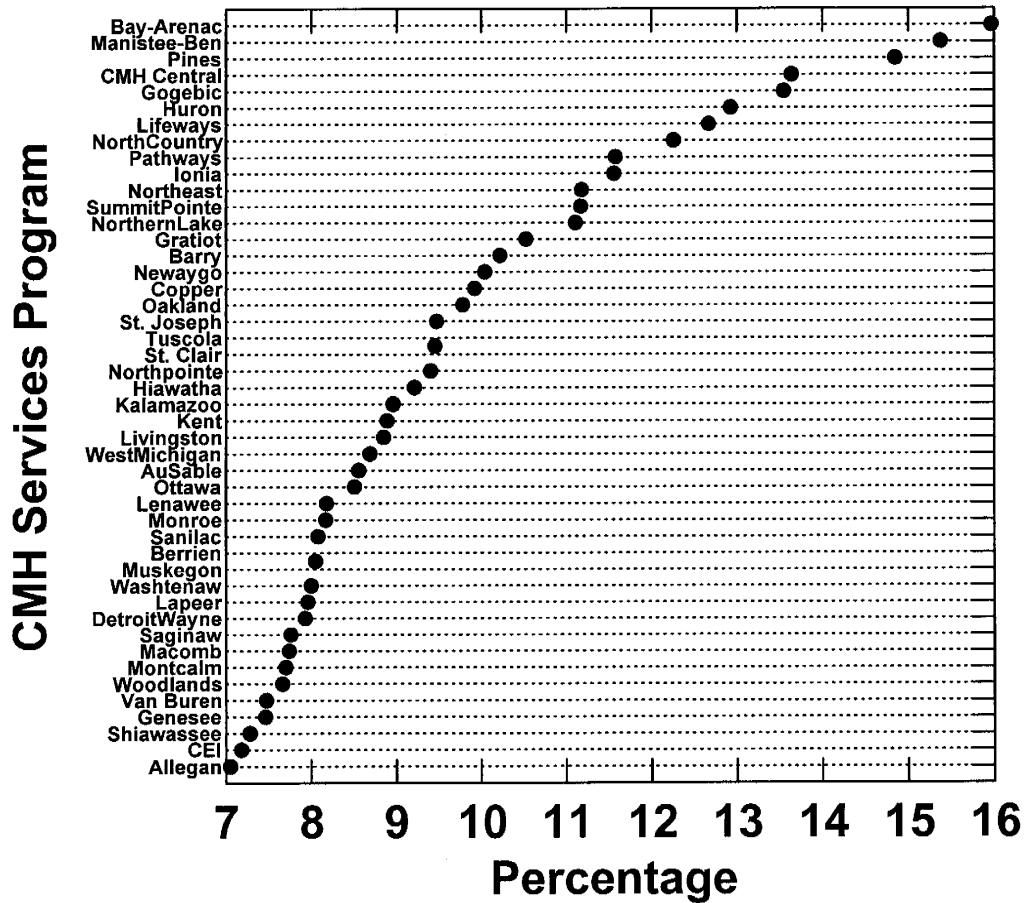
**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, there was a range of percentages from 7.05 to 15.97 percent. The dot plot shows a gap between the three highest CMHSPs (Bay-Arenac, 15.97%; Manistee-Benzie, 15.38%; and Pines, 14.85%) and the other CMHSPs. The average annual FY'05 percentage for this indicator is 8.96 percent. This is a slight increase as compared to the previous three years: FY02, 7.78%; FY03, 6.47%; FY04, 8.65%.

**Percentage of Area Medicaid Recipients Having Received CMHSP Managed Services by CMHSP**

CMHSP	FY 2002			FY 2003			FY 2004*			FY 2005		
	# Medicaid Recipients Served	# Eligibles in Area	Percentage	# Medicaid Recipients Served	# Eligibles in Area	Percentage	# Medicaid Recipients Served	# Eligibles in Area	Percentage	# Medicaid Recipients Served	# Eligibles in Area	Percentage
Allegan CMH	996	15,010	6.64%	1,102	16,790	6.56%	1,391	18,584	7.48%	1,405	19,916	7.05%
AuSable Valley CMH	1,352	12,691	10.65%	485	13,282	3.65%	1,801	14,498	12.42%	1,328	15,515	8.56%
Barry CMH	557	7,163	7.78%	726	7,884	9.21%	956	8,747	10.93%	975	9,537	10.22%
Bay-Arenac CMH	2,508	21,560	11.63%	1,626	22,522	7.22%	3,812	24,536	15.54%	4,138	25,916	15.97%
Berrien CMH	2,312	33,952	6.81%	2,935	34,662	8.47%	3,309	36,331	9.11%	2,984	37,062	8.05%
CEI CMH	3,958	61,146	6.47%	4,010	64,090	6.26%	5,047	69,868	7.22%	5,299	73,785	7.18%
CMH for Central Michigan	4,593	43,510	10.56%	5,121	46,184	11.09%	7,816	51,109	15.29%	7,442	54,546	13.64%
Copper Country CMH	980	9,109	10.76%	671	9,444	7.11%	1,096	10,141	10.81%	1,053	10,610	9.92%
Detroit-Wayne CMH	31,510	469,067	6.72%	16,677	484,116	3.44%	33,714	510,501	6.60%	41,142	518,989	7.93%
Genesee CMH	5,408	92,831	5.83%	6,190	97,247	6.37%	7,567	102,951	7.35%	8,062	108,077	7.46%
Gogebic CMH	570	3,344	17.05%	476	3,462	13.75%	475	3,552	13.37%	508	3,749	13.55%
Gratiot CMH	761	6,932	10.98%	792	7,589	10.44%	935	8,388	11.15%	982	9,330	10.53%
Hiawatha CMH	1,051	10,028	10.48%	498	10,776	4.62%	1,086	11,712	9.27%	1,107	12,020	9.21%
Huron CMH	702	6,055	11.59%	587	6,450	9.10%	818	7,013	11.66%	927	7,170	12.93%
Ionia CMH	767	9,157	8.38%	837	10,053	8.33%	1,273	11,260	11.31%	1,399	12,097	11.56%
Kalamazoo CMH	2,859	35,215	8.12%	1,969	37,274	5.28%	3,635	40,566	8.96%	3,836	42,795	8.96%
Kent CMH	8,148	91,184	8.94%	8,269	98,645	8.38%	9,723	107,098	9.08%	9,668	108,776	8.89%
Lapeer CMH	644	9,789	6.58%	674	10,971	6.14%	924	12,318	7.50%	1,025	12,883	7.96%
Lenawee CMH	902	13,542	6.66%	786	14,622	5.38%	1,324	15,983	8.28%	1,369	16,729	8.18%
Lifeways CMH	2,418	32,855	7.36%	3,153	35,172	8.96%	4,823	38,329	12.58%	5,191	40,963	12.67%
Livingston CMH	790	8,369	9.44%	779	9,461	8.23%	1,091	10,963	9.95%	1,110	12,541	8.85%
Macomb CMH	5,119	74,590	6.86%	6,395	83,385	7.67%	7,631	94,686	8.06%	7,866	101,568	7.74%
Manistee-Benzie CMH	991	7,361	13.46%	694	7,536	9.21%	1,360	8,213	16.56%	1,322	8,595	15.38%
Monroe CMH	1,770	16,092	11.00%	1,550	17,592	8.81%	1,919	19,560	9.81%	1,747	21,377	8.17%
Montcalm CMH	685	11,073	6.19%	762	11,983	6.36%	1,101	13,150	8.37%	1,097	14,255	7.70%
Muskegon CMH	2,401	36,613	6.56%	2,719	38,948	6.98%	3,258	41,759	7.80%	3,527	43,827	8.05%
Newaygo CMH	844	9,855	8.56%	891	10,623	8.39%	1,067	11,497	9.28%	1,218	12,126	10.04%
North Country CMH	2,244	24,549	9.14%	2,931	26,535	11.05%	3,174	29,428	10.79%	3,531	31,776	11.11%
Northeast CMH	1,512	12,334	12.26%	1,704	12,710	13.41%	1,644	14,047	11.70%	1,648	14,745	11.18%
Northern Lakes CMH	3,452	29,900	11.55%	3,302	32,110	10.28%	4,511	35,505	12.71%	4,675	38,137	12.26%
Northpointe CMH	1,318	10,576	12.46%	981	11,302	8.68%	1,247	12,182	10.24%	1,213	12,899	9.40%
Oakland CMH	6,975	96,990	7.19%	7,923	104,450	7.59%	10,070	114,855	8.77%	11,789	120,505	9.78%
Ottawa CMH	1,697	21,633	7.84%	1,718	24,460	7.02%	2,353	27,147	8.67%	2,446	28,727	8.51%
Pathways CMH	2,156	18,523	11.64%	1,166	19,263	6.05%	2,179	20,953	10.40%	2,563	22,141	11.58%
Pines CMH	1,072	7,686	13.95%	1,169	8,274	14.13%	1,396	9,206	15.16%	1,467	9,880	14.85%
Saginaw CMH	3,019	44,209	6.83%	2,659	45,791	5.81%	3,726	47,987	7.76%	3,883	50,012	7.76%
Sanilac CMH	583	8,000	7.29%	609	8,530	7.14%	728	9,321	7.81%	797	9,868	8.08%
Shiawassee CMH	553	10,846	5.10%	537	11,585	4.64%	909	12,890	7.05%	1,002	13,769	7.28%
St. Clair CMH	1,759	23,010	7.64%	1,755	25,309	6.93%	2,492	27,955	8.91%	2,810	29,732	9.45%
St. Joseph CMH	1,079	12,143	8.89%	978	13,145	7.44%	1,300	14,107	9.22%	1,380	14,579	9.47%
Summit Pointe CMH	3,582	27,109	13.21%	2,324	28,580	8.13%	3,423	31,356	10.92%	3,745	33,520	11.17%
Tuscola CMH	899	9,869	9.11%	806	10,611	7.60%	1,200	11,405	10.52%	1,126	11,914	9.45%
Van Buren CMH	1,085	19,259	5.63%	1,005	19,885	5.05%	1,584	21,281	7.44%	1,592	21,320	7.47%
Washtenaw CMH	2,269	26,775	8.47%	2,343	28,761	8.15%	2,735	31,691	8.63%	2,694	33,667	8.00%
West Michigan CMH	1,134	16,846	6.73%	1,953	17,801	10.97%	1,658	19,228	8.62%	1,698	19,534	8.69%
Woodlands CMH	730	9,656	7.56%	827	10,099	8.19%	827	10,736	7.70%	862	11,254	7.66%
<b>Total</b>	<b>122,714</b>	<b>1,578,006</b>	<b>7.78%</b>	<b>108,064</b>	<b>1,669,964</b>	<b>6.47%</b>	<b>156,108</b>	<b>1,804,593</b>	<b>8.65%</b>	<b>168,648</b>	<b>1,882,733</b>	<b>8.96%</b>

\*Note: FY2004 & FY2005 data for number of Medicaid recipients served contains additional Medicaid ID's that would otherwise not been counted due to a new process which allows us to find the individual beneficiary id number for those that are missing in our QI file. Starting in FY 2004 we started utilizing the clients Social Security Number and linked it in to the Medicaid Eligibility file. This allows us to obtain additional Medicaid ID's for a more accurate figure on how many persons with Medicaid were served. It should be noted however that this process was not in place for the fiscal years prior to 2004 and therefore there may be a large difference in the number served when compared over time.

# Percentage of Area Medicaid Recipients Having Received CMHSP Managed Services FY 2005





*Indicator 27: Access: Denial/Appeal – Percentage of face-to-face assessments with professionals*

**Rationale for Use:**

As managed care organizations, CMHSPs are responsible for exercising appropriate control of entry into the public mental health system. The professional assessment represents one of the first opportunities for a CMHSP to control access to its non-emergent services and supports.

**Definitions:**

Section 330.1705 of Public Act 1974 as revised, was intended to capture requests for initial entry into the CMHSP. Requests for changes in the levels of care received are governed by other sections of the Code.

A **professional assessment** is that face-to-face meeting with a professional that results in a admission to ongoing CMHSP service, a denial of CMHSP service, or a referral elsewhere.

**Method of Calculation:**

- **Numerator:** The number of persons denied services, or referred elsewhere.
- **Denominator:** The number of persons receiving a face-to-face assessment with a professional. It excludes those cases in which the individual refused CMHSP services that were authorized.

**Descriptive Statistics:**

	DEC_04	MARCH_05	JUNE_05	SEPT_05
N of cases	46	46	46	46
Minimum	0.000	0.000	0.000	0.000
Maximum	30.460	36.550	38.330	43.240
Median	5.271	6.895	5.990	7.105
Mean	7.334	8.248	8.375	9.440

**Comments:**

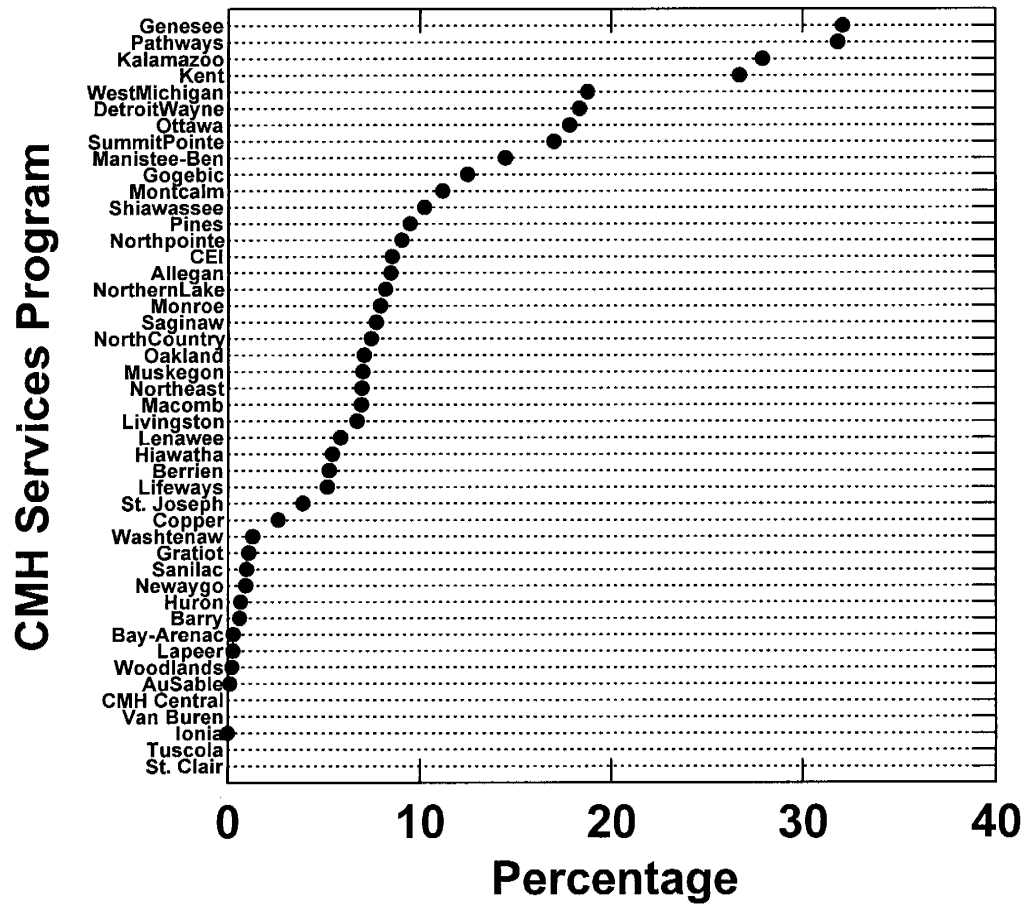
**Historical trends:** This indicator has been in place only since FY '04. The trend line (lowess smooth line) of the longitudinal scatter plot shows a static trend around 5 percent. The scatterplot also shows that there is very little variation or spread among the CMHSPs.

**2005 CMHSP Performance:** As shown in the ordered dot plot for FY '05, the percentages for the majority of CMHSPs were between 0-10 percent for this indicator. There was some spread toward the higher percentages ranging to 32 percent. The CMHSPs that scored below 1 percent on this indicator were Huron (0.68%), Barry (0.63%), Bay-Arenac (0.29%), Lapeer (0.28%), Woodlands (0.22%), AuSable (0.12%), CMH Central (0.0%), Ionia (0.0%), St. Clair (0.0%), Tuscola (0.0%), Van Buren (0.0%)

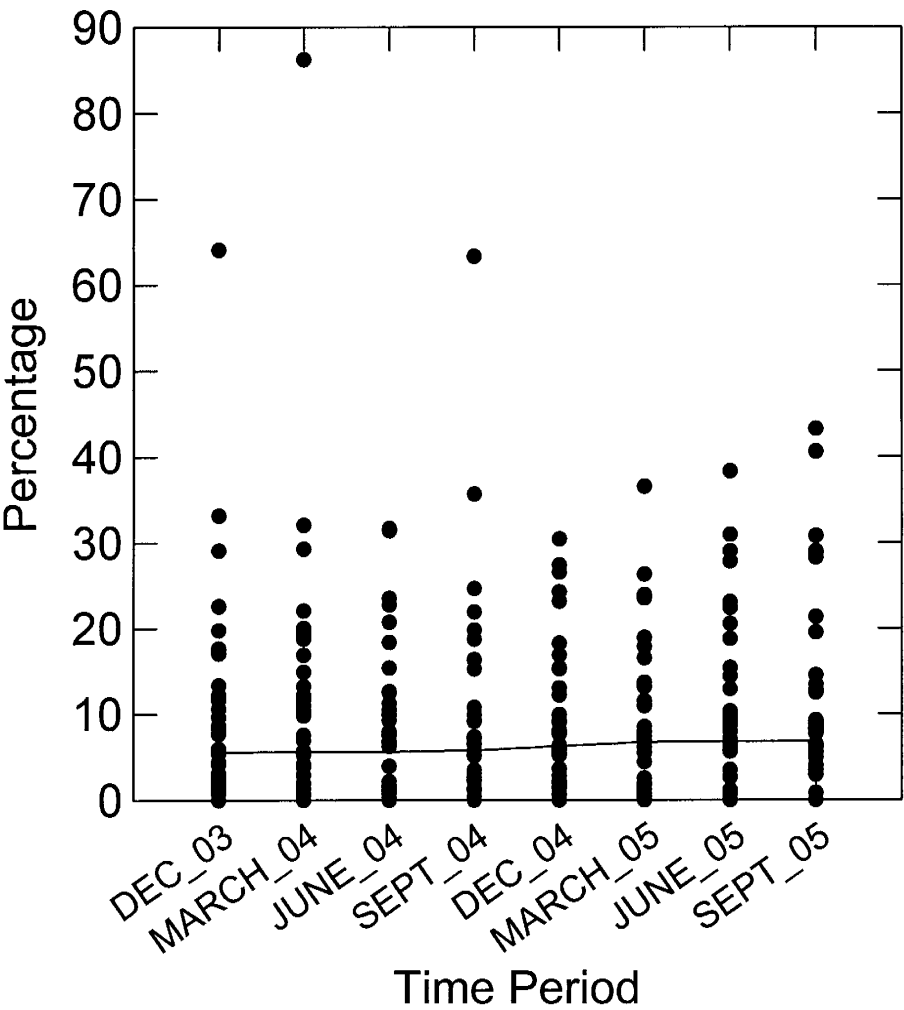
Indicator 27: Percent of Face-to-Face Assessments with a Professional that Resulted in Denials or Referrals Elsewhere

	October - December 2004			January - March 2005			April - June 2005			July - September 2005			Fiscal Year Percentage
	Percentage Q1	Persons Assessed Q1	Persons Denied Services or Referred Q1	Percentage Q2	Persons Assessed Q2	Persons Denied Services or Referred Q2	Percentage Q3	Persons Assessed Q3	Persons Denied Services or Referred Q3	Percentage Q4	Persons Assessed Q4	Persons Denied Services or Referred Q4	
Allegan	7.69%	143	11	7.45%	94	7	9.45%	127	12	9.26%	108	10	8.47
AuSable	0.00%	211	0	0.43%	235	1	0.00%	159	0	0.00%	242	0	0.12
Barry	0.00%	162	0	0.00%	171	0	0.64%	156	1	1.99%	151	3	0.63
Bay-Arenac	0.66%	303	2	0.38%	264	1	0.00%	230	0	0.00%	239	0	0.29
Berrien	3.65%	274	10	6.13%	261	16	6.55%	275	18	4.91%	265	13	5.30
CEI	2.15%	466	10	10.93%	485	53	8.99%	445	40	12.79%	383	49	8.54
CMH Central MI	0.00%	668	0	0.00%	708	0	0.00%	592	0	0.00%	645	0	0.00
Copper	1.96%	51	1	2.53%	79	2	1.15%	87	1	6.25%	48	3	2.64
Detroit-Wayne	18.26%	1,161	212	16.54%	1,276	211	18.77%	1,444	271	19.52%	1,542	301	18.35
Genesee	30.46%	1,228	374	36.55%	1,428	522	27.84%	747	208	30.80%	880	271	32.10
Gogebic	7.79%	77	6	11.54%	104	12	8.70%	69	6	28.26%	46	13	12.50
Gratiot	1.39%	72	1	1.67%	60	1	0.00%	35	0	0.00%	14	0	1.10
Hiawatha	2.84%	141	4	5.48%	219	12	5.63%	142	8	8.82%	102	9	5.46
Huron	1.49%	67	1	0.00%	72	0	1.11%	90	1	0.00%	63	0	0.68
Ionia	0.00%	130	0	0.00%	146	0	0.00%	146	0	0.00%	145	0	0.00
Kalamazoo	27.42%	186	51	26.32%	190	50	29.03%	186	54	29.03%	186	54	27.94
Kent	24.28%	1,244	302	23.87%	1,244	297	30.95%	1,079	334	28.85%	991	283	26.74
Lapeer	0.00%	88	0	1.22%	82	1	0.00%	85	0	0.00%	99	0	0.28
Lenawee	0.00%	104	0	11.50%	113	13	6.62%	151	10	4.93%	142	7	5.88
Lifeways	2.22%	225	5	7.92%	202	16	5.79%	121	7	5.56%	144	8	5.20
Livingston	12.22%	90	11	1.79%	56	1	2.63%	76	2	7.78%	90	7	6.73
Macomb	5.21%	499	26	18.91%	476	90	3.50%	658	23	3.45%	724	25	6.96
Manistee-Benzie	5.43%	92	5	4.44%	90	4	23.08%	78	18	43.24%	37	16	14.48
Monroe	9.01%	111	10	8.51%	94	8	5.83%	120	7	8.74%	103	9	7.94
Montcalm	15.38%	91	14	13.17%	167	22	9.46%	148	14	8.28%	157	13	11.19
Muskegon	5.80%	276	16	5.56%	270	15	7.97%	276	22	8.88%	259	23	7.03
Newaygo	1.40%	143	2	0.77%	130	1	0.73%	137	1	0.81%	123	1	0.94
Northern Lakes	6.39%	532	34	7.94%	491	39	10.31%	485	50	8.37%	406	34	8.20
Northeast	0.70%	143	1	6.76%	148	10	12.90%	124	16	8.70%	115	10	6.98
North Country	8.12%	468	38	7.40%	527	39	6.57%	426	28	7.71%	428	33	7.46
Northpointe	9.93%	141	14	11.03%	145	16	9.79%	143	14	6.15%	179	11	9.05
Oakland	9.26%	875	81	7.03%	939	66	5.75%	956	55	6.50%	892	58	7.10
Ottawa	15.27%	203	31	23.53%	187	44	20.53%	151	31	13.43%	216	29	17.83
Pathways	26.57%	207	55	23.91%	230	55	38.33%	227	87	40.61%	165	67	31.85
Pines	8.09%	235	19	7.41%	216	16	15.38%	143	22	9.09%	187	17	9.48
Saginaw	5.99%	167	10	13.25%	166	22	7.09%	127	9	4.03%	149	6	7.72
Sanilac	0.00%	72	0	0.00%	73	0	1.11%	90	1	2.94%	68	2	0.99
Shiawassee	13.04%	115	15	13.67%	139	19	6.15%	130	8	8.21%	134	11	10.23
St. Clair	0.00%	221	0	0.00%	221	0	0.00%	211	0	0.00%	200	0	0.00
St. Joseph	5.33%	75	4	0.00%	111	0	0.00%	90	0	12.50%	80	10	3.93
Summit Pointe	23.16%	272	63	17.85%	325	58	14.42%	312	45	14.53%	461	67	17.01
Tuscola	0.00%	89	0	0.00%	80	0	0.00%	82	0	0.00%	74	0	0.00
Van Buren	0.00%	135	0	0.00%	158	0	0.00%	140	0	0.00%	130	0	0.00
Washtenaw	1.95%	154	3	1.98%	101	2	0.74%	135	1	0.00%	70	0	1.30
West Michigan	16.87%	166	28	13.29%	173	23	22.39%	201	45	21.33%	211	45	18.77
Woodlands	0.00%	116	0	0.75%	133	1	0.00%	114	0	0.00%	101	0	0.22
	11.58%	12,689	1,470	13.30%	13,279	1,766	12.10%	12,146	1,470	12.46%	12,184	1,518	

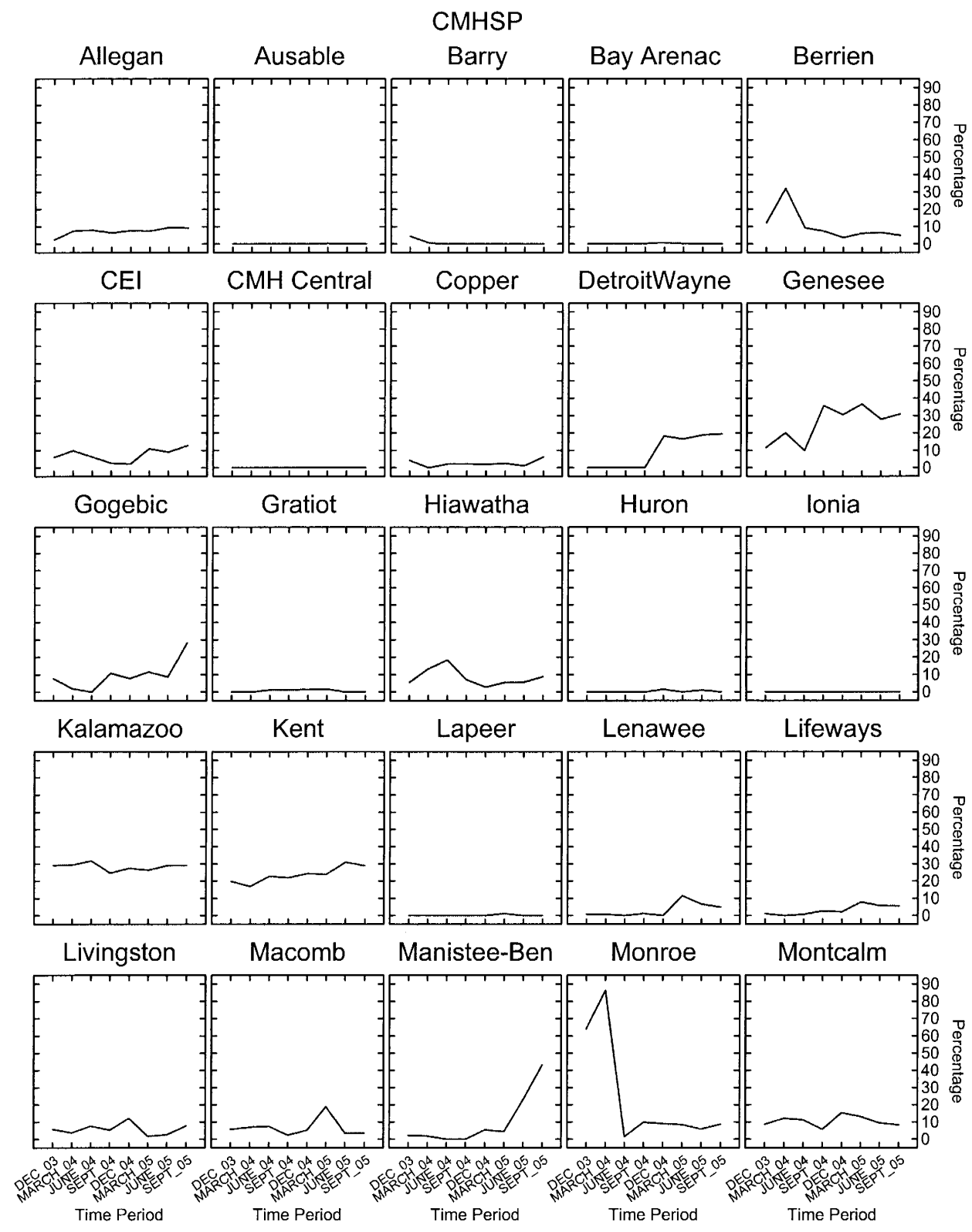
# Percent of Face-to-Face Assessments with a Professional that Resulted in Denials or Referrals Elsewhere



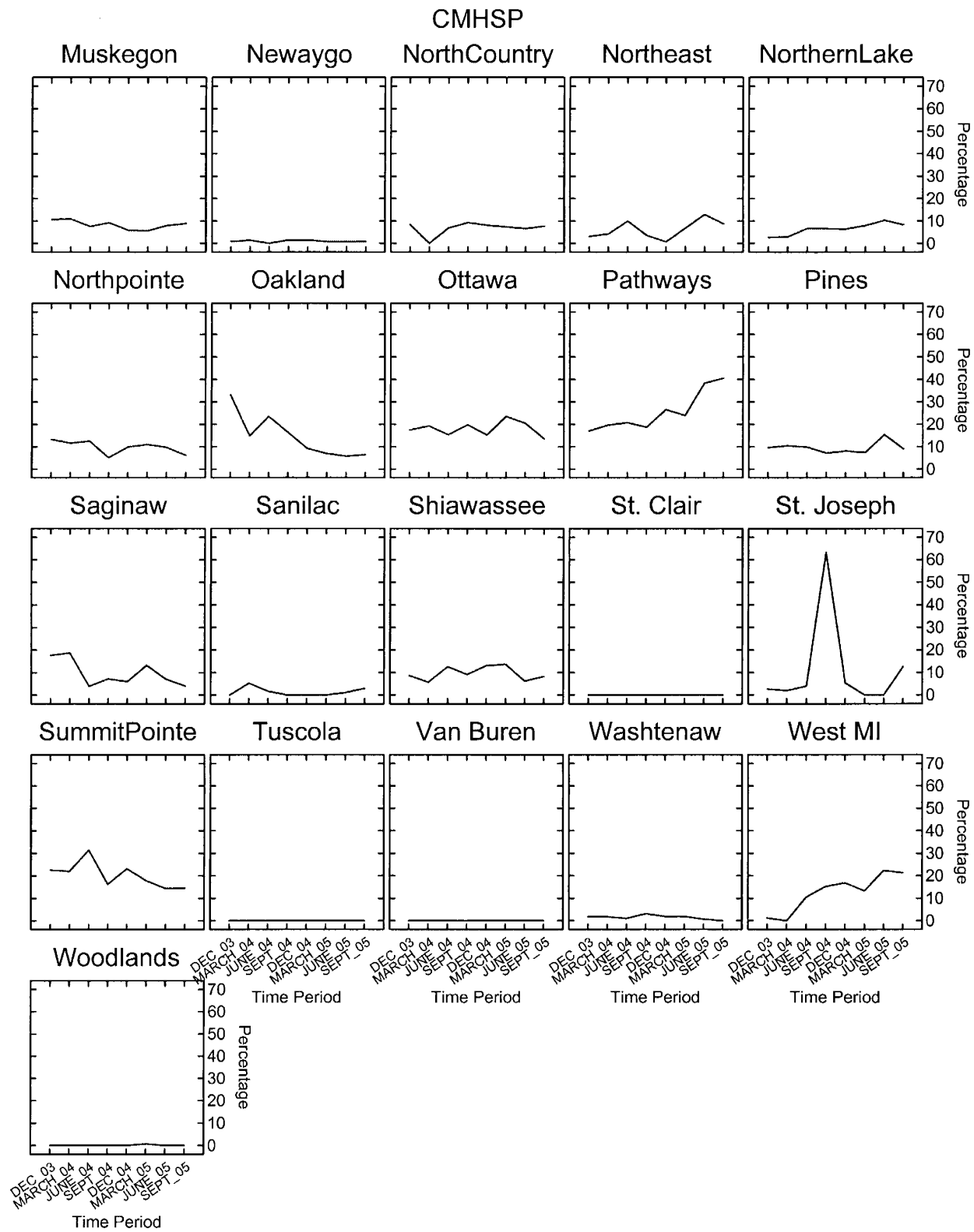
Scatterplot 27: % Face-to-Face Assmt. w/ Professionals



# Indic. 27 - % Face-to-Face Assessments w/ Professionals



Indic. 27 - Page Two



*Indicator 33. Efficiency: The percentage of total expenditures spent on CMHSP administrative functions (all funding streams).*

**Rationale for Use:** There is interest in determining what portion of an agency's costs are spent on operating the agency relative to the cost of providing services. Combined with other indicators of performance, information on percentage spent on administrative costs can be used as an indication of an agency's efficiency.

**Definition:** Using guidance provided by the Centers for Medicare and Medicaid Services, the Encounter Data Integrity Team (EDIT) developed detailed guidelines for defining administrative costs, which were first implemented in FY2004. EDIT identified seven core functions to include in the calculation of managed care administration expenditures – utilization management, customer services, provider network management, quality management, financial management, information systems management, and general management.

**Method of Calculation:**

- **Numerator:** The amount of administrative costs reported on the CMHSP sub-element cost report, which represents all agency administrative costs regardless of funding stream.
- **Denominator:** The total costs reported on the CMHSP sub-element cost report, which includes service costs, administrative costs and 'other' costs such as leases, program money matches, and the cost of sponsored events. The CMHSP total costs include all agency costs regardless of funding stream.

**Comments:**

The report includes FY2004 & FY 2005 data. Please note that FY 2004 was the first year that the CMHSPs applied EDIT's revised standards for calculating the administrative costs. For FY'05, the percentage spent on administrative costs ranges from 1.42 percent for Livingston CMH to 16.6 percent for Monroe. The state-wide average percentage for FY'05 is 8.52 percent. This average is similar to that for FY'04 of 8.66 percent.

Indicator 33: Percentage of Total Expenditures Spent on Administrative Functions

	Fiscal Year 2004			Fiscal Year 2005		
	Percentage	Administrative Cost	Total Cost	Percentage	Administrative Cost	Total Cost
Allegan	6.70%	\$1,147,711.00	\$17,134,896.00	7.44%	\$1,280,525.00	\$17,214,261.00
AuSable Valley	3.93%	\$465,071.00	\$11,848,825.00	4.66%	\$534,245.00	\$11,458,825.00
Barry	2.37%	\$106,633.00	\$4,505,993.00	12.69%	\$593,362.00	\$4,677,432.00
Bay-Arenac	13.56%	\$3,966,261.00	\$29,252,343.00	15.65%	\$4,958,904.00	\$31,678,753.00
Berrien	2.14%	\$585,318.00	\$27,393,990.00	2.01%	\$541,069.00	\$26,887,896.00
Clinton Eaton Ingham	7.23%	\$4,942,753.00	\$68,402,587.00	7.87%	\$5,273,430.00	\$66,965,078.00
CMH for Central Michigan	6.59%	\$4,027,200.00	\$61,084,974.00	7.79%	\$5,028,605.00	\$64,519,799.00
Copper Country	11.56%	\$1,667,986.00	\$14,423,724.00	2.34%	\$309,076.00	\$13,190,745.00
Detroit-Wayne	11.97%	\$54,726,648.00	\$457,344,426.00	11.93%	\$56,842,090.00	\$476,305,142.00
Genesee	9.74%	\$8,815,552.00	\$90,476,248.00	8.79%	\$8,796,088.00	\$100,024,835.00
Gogebic	3.13%	\$187,398.00	\$5,987,183.00	3.76%	\$223,841.00	\$5,959,686.00
Gratiot	5.71%	\$552,718.00	\$9,684,183.00	5.90%	\$568,238.00	\$9,636,276.00
Hiawatha	12.76%	\$1,853,132.00	\$14,522,901.00	1.60%	\$249,017.00	\$15,547,567.00
Huron	3.10%	\$233,040.00	\$7,514,887.00	2.72%	\$217,825.00	\$8,013,064.00
Ionia	8.18%	\$725,088.00	\$8,863,784.00	8.12%	\$747,420.00	\$9,199,503.00
Kalamazoo	8.52%	\$4,415,462.00	\$51,836,454.00	13.71%	\$7,761,981.00	\$56,630,995.00
Lapeer	3.38%	\$389,838.00	\$11,518,034.00	3.60%	\$432,716.00	\$12,020,703.00
Lenawee	10.61%	\$1,576,849.00	\$14,866,931.00	2.02%	\$321,289.00	\$15,930,651.00
Lifeways	10.69%	\$3,378,705.00	\$31,609,400.00	9.59%	\$3,547,904.00	\$37,011,142.00
Livingston	2.91%	\$470,511.00	\$16,183,058.00	1.42%	\$245,950.00	\$17,302,775.00
Macomb	6.51%	\$8,664,355.00	\$133,184,777.00	6.78%	\$9,176,685.00	\$135,271,714.00
Manistee-Benzie	5.37%	\$766,134.00	\$14,275,247.00	5.52%	\$768,126.00	\$13,919,960.00
Monroe	13.51%	\$3,172,767.00	\$23,476,657.00	16.60%	\$4,218,426.00	\$25,409,989.00
Montcalm	10.54%	\$693,645.00	\$6,578,631.00	7.81%	\$534,401.00	\$6,845,888.00
Muskegon	9.35%	\$3,458,370.00	\$37,002,575.00	6.20%	\$2,561,368.00	\$41,326,989.00
Network180	9.07%	\$7,355,101.00	\$81,125,403.00	14.24%	\$12,613,431.00	\$88,607,897.00
Newaygo	9.57%	\$629,098.00	\$6,574,739.00	10.22%	\$754,024.00	\$7,378,655.00
North Country	7.38%	\$2,096,866.00	\$28,399,174.00	8.33%	\$2,397,470.00	\$28,793,474.00
Northeast Michigan	2.78%	\$560,422.00	\$20,194,742.00	3.40%	\$657,653.00	\$19,339,720.00
Northern Lakes	6.36%	\$2,430,631.00	\$38,227,854.00	5.73%	\$2,154,266.00	\$37,614,641.00
Northpointe	0.85%	\$121,292.00	\$14,201,761.00	3.70%	\$534,848.00	\$14,461,168.00
Oakland	5.72%	\$11,364,515.00	\$198,625,783.00	5.68%	\$12,489,550.00	\$220,004,923.00
Ottawa	5.64%	\$1,507,114.00	\$26,742,409.00	4.83%	\$1,332,503.00	\$27,583,145.00
Pathways	11.06%	\$3,451,846.00	\$31,212,595.00	5.14%	\$2,010,773.00	\$39,123,968.00



Indicator 33: Percentage of Total Expenditures Spent on Administrative Functions

	Fiscal Year 2004			Fiscal Year 2005		
	Percentage	Administrative Cost	Total Cost	Percentage	Administrative Cost	Total Cost
Pines	2.72%	\$216,518.00	\$7,951,513.00	3.84%	\$314,536.00	\$8,197,355.00
Saginaw	7.43%	\$2,759,985.00	\$37,153,488.00	4.96%	\$4,273,808.00	\$86,182,053.00
Sanilac	4.93%	\$774,353.00	\$15,719,308.00	5.41%	\$833,990.00	\$15,416,434.00
Shiawassee	1.68%	\$196,712.00	\$11,719,309.00	2.51%	\$310,277.00	\$12,356,585.00
St. Clair	10.57%	\$3,838,928.00	\$36,312,955.00	10.73%	\$3,984,300.00	\$37,132,885.00
St. Joseph	10.44%	\$1,041,060.00	\$9,973,914.00	2.89%	\$300,000.00	\$10,391,546.00
Summit Pointe	9.16%	\$2,408,147.00	\$26,301,115.00	9.31%	\$2,703,624.00	\$29,055,418.00
Tuscola	4.29%	\$560,199.00	\$13,066,189.00	5.56%	\$736,573.00	\$13,240,383.00
Van Buren	1.50%	\$180,109.00	\$12,031,092.00	1.91%	\$251,233.00	\$13,167,930.00
Washtenaw	16.71%	\$5,982,543.00	\$35,808,601.00	10.62%	\$4,661,165.00	\$43,879,264.00
West Michigan	6.36%	\$849,114.00	\$13,354,467.00	6.98%	\$896,756.00	\$12,847,895.00
Woodlands	2.26%	\$200,000.00	\$8,867,130.00	2.21%	\$200,000.00	\$9,063,592.00
<b>Total</b>	<b>8.66%</b>	<b>\$159,513,698.00</b>	<b>\$1,842,536,249.00</b>	<b>8.52%</b>	<b>\$170,143,361.00</b>	<b>\$1,996,788,599.00</b>